| Fill in this information to identify your case: |  |                                    |
|---|--|------------------------------------|
| United States Bankruptcy Court for the :        |  |                                    |
| NORTHERN District of ILLINOIS (State)           |  |                                    |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:         | Identify Yourself   |                            |   |
|-----------------|---|----------------------------|---|
|                 |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your         | full name   |                            |   |
| goverr          | the name that is on your<br>nment-issued picture<br>ication (for example, | Dorothy First name         | First name                                    |
| your d<br>passp | river's license or ort).  | Ann Middle name            | Middle name                                   |
| identifi        | your picture<br>ication to your meeting<br>le trustee.                    | Syers Last name            | Last name                                     |
| with the        | ic ilusice.   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All ot       | her names you   |                            |   |
|                 | used in the last 8  | First name                 | First name                                    |
|                 | e your married or<br>n names.   | Middle name                | Middle name                                   |
|                 |   | Last name                  | Last name                                     |
|                 |   | First name                 | First name                                    |
|                 |   | Middle name                | Middle name                                   |
|                 |   | Last name                  | Last name                                     |
| your            | the last 4 digits of<br>Social Security                                   | xxx - xx2728               | XXX - XX                                      |
| Individ         | er or federal<br>dual Taxpayer  | OR                         | OR  |
| identii         | fication number   | 9xx - xx                   | 9xx - xx                                      |

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Document Syers Dorothy Ann Debtor 1 Case Number (if known) Last Name

|  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  I have not used any business names or EINs.  Business name  Business name  EIN   |  |
|--|--|---|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names | Business name  Business name  EIN  EIN   |   |  |
| 5. Where you live  | 3127 N 78th Ct   | If Debtor 2 lives at a different address:   |  |
|  | Elmwood Park  City  State  ZIP Code  COOK  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | City State ZIP Code  County  If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.            |  |
|  | Number Street  P.O. Box  City State ZIP Code   | Number Street  P.O. Box  City State ZIP Code  |  |
| 6. Why you are choosing this district to file for bankruptcy.  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  have another reason. Explain. (See 28 U.S.C. § 1408                  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 |  |

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Debtor 1

Dorothy Ann Document Syers Last Name

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Case Number (if known)

| Pa  | rt 2: Tell the Court About Your   | Bankruptcy   | Case   |                          |   |                          |  |  |
|-----|---|--|--|--------------------------|---|--------------------------|--|--|
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11   |  |                          |   |                          |  |  |
|     | under   |  |  |                          |   |                          |  |  |
|     |   |  | Chapter 12   |                          |   |                          |  |  |
|     |   | ■ Chap   | oter 13  |                          |   |                          |  |  |
| 8.  | How you will pay the fee  | local<br>yours<br>subm   | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. |                          |   |                          |  |  |
|     |   |  |  |                          | pose this option, sign and<br>e in Installments (Official |                          |  |  |
|     |   | I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition. |  |                          |   |                          |  |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | □ No ■ Yes.  | District NDIL  | When                     | 09/26/2011 <sub>Case Num</sub>                            | <sub>per_</sub> 11-38975 |  |  |
|     |   |  |  | _                        | MM / DD / YYYY  |                          |  |  |
|     |   |  | District None  | When                     | Case Num  | per                      |  |  |
|     |   |  |  |                          | MM / DD / YYYY  |                          |  |  |
|     |   |  | District   | When                     | MM / DD / YYYY  | per                      |  |  |
| 10. | Are any bankruptcy cases pending or being   | ■ No   |  |                          |   |                          |  |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>parter, or by<br>affiliate? | ☐ Yes.   |  |                          |   | to you<br>ber, if known  |  |  |
|     |   |  |  |                          |   | to you                   |  |  |
| 11. | Do you rent your residence?   | ■ No.<br>□ Yes.  | Go to line 12<br>Has your landlord obta  | ained an eviction judgme | ent against you?  |                          |  |  |
|     |   | <ul> <li>□ No. Go to line 12.</li> <li>□ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.</li> </ul>   |  |                          |   |                          |  |  |

Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main Document Page 4 of 60 Dorothy Ann Syers Case Number (if known) Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnerhsip, or Street Number LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. City Zip Code Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ■ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent Chapter 11 of the balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these **Bankruptcy Code and** documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No 14. Do you own or have any property that poses or is ☐ Ye alleged to pose a threat of imminent and indentifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| What is the hazard?       |             |               | <br> |  |
|---------------------------|-------------|---------------|------|--|
|                           |             |               |      |  |
|                           |             |               |      |  |
| If immediate attention is | needed, why | is it needed? |      |  |
|                           |             |               |      |  |
| Where is the property?    |             |               | <br> |  |
|                           | Number      | Street        |      |  |
|                           |             |               | <br> |  |
|                           |             |               | <br> |  |

Debtor 1

Dorothy

Document Syers

Page 5 of 60

Ann

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

# About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefin | g about |
|--|---------|
| credit counseling because of:          |         |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rece | ive a briefing about |
|---------------------------|----------------------|
| credit counseling because | se of:               |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Dorothy Ann Document Syers Page 6 of 60

Case Number (if known)

|     | First Name   | Middle Name Las  | ast Name   |  |
|-----|--|--|--|--|
| Pai | t 6: Answer These Questions  | s for Reporting Purposes   |  |  |
| 16. | What kind of debts do<br>you have?   | as "incurred by an indi  No. Go to line 16b  Yes. Go to line 17  16b. Are your debts prin money for a business of the line 16c  No. Go to line 16c  Yes. Go to line 17                                       | 7.  marily business debts? Business debt or investment or through the operation of c.  | ts are debts that you incurred to obtain the business or investment.   |
| 17. | Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under   | nder Chapter 7. Go to line 18.  Chapter 7. Do you estimate that after an xpenses are paid that funds will be availat   |  |
| 18. | How many creditors do you estimate that you owe?   | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |
| 19. | How much do you estimate your assets to be worth?  | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | on \$10,000,000,001-\$50 billion   |
| 20. | How much do you estimate your liabilities to be?   | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 millior \$50,000,001-\$100 millior \$100,000,001-\$500 mill   | on \$10,000,000,001-\$50 billion   |
| Pa  | Sign Below   |  |  |  |
| For | you  | correct.  If I have chosen to file under of title 11, United States Counder Chapter 7.  If no attorney represents me this document, I have obtain I request relief in accordance I understand making a false | e and I did not pay or agree to pay someoned and read the notice required by 11 U.  where with the chapter of title 11, United State estatement, concealing property, or obtain result in fines up to \$250,000, or imprisor | ed, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed the who is not an attorney to help me fill out S.C. § 342(b).  Is Code, specified in this petition.  Sometimes where the second |
|     |  | Signature of Debtor 1  Executed on 12/05/MM  |  | Signature of Debtor 2  Executed onMM / DD / YYYY   |

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| Debtor 1 | Dorothy    | Ann         | Syers     | Case Number (if known) |  |
|----------|------------|-------------|-----------|------------------------|--|
|          | First Name | Middle Name | Last Name |                        |  |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Wylie W Mok                | Date      | Date: 12/15/2  | 017        |
|----------------------------------|-----------|----------------|------------|
| Signature of Attorney for Debtor | Duto      | MM / DD / YYYY | ,          |
| Wylie W Mok                      |           |                |            |
| Printed name                     |           |                | _          |
| Geraci Law L.L.C.                |           |                |            |
| Firm name                        |           |                | -          |
| 55 E. Monroe St., #3400          |           |                |            |
| Number Street                    |           |                | -          |
|                                  |           |                | =          |
| Chicago                          | IL        | 60603          |            |
| City                             | State     | ZIP Code       | •          |
| Contact Phone312-332-1800        | Email add | ressndil@gera  | acilaw.com |
| 6293407                          | IL        |                |            |
| Bar number                       | State     |                |            |
|                                  |           |                |            |

| Fill in this information to identify your case:  |            |             |           |  |  |
|--|------------|-------------|-----------|--|--|
| Debtor 1   | Dorothy    | Ann         | Syers     |  |  |
|  | First Name | Middle Name | Last Name |  |  |
| Debtor 2   |            |             |           |  |  |
| (Spouse, if filing)  | First Name | Middle Name | Last Name |  |  |
| United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) |            |             |           |  |  |
| Case Number<br>(If known)  | -          |             |           |  |  |
|  |            |             |           |  |  |

## Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: Summarize Your Assets   |                                      |
|---|--------------------------------------|
|   | Your assets<br>Value of what you own |
| Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B  | \$ 0                                 |
| 1b. Copy line 62, Total personal property, from Schedule A/B  | \$ 210,577                           |
| 1c. Copy line 63, Total of all property on Schedule A/B   | \$ 210,577                           |
|   |                                      |
| Part 2: Summarize Your Liabilities  |                                      |
|   | Your liabilities Amount you owe      |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$181,522                            |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$600                                |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$103,698                            |
|   |                                      |
|   |                                      |
| Part 3: Summarize Your Liabilities  |                                      |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$3,986.28                           |
| Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J   | \$3,484.00                           |

Document Dorothy Ann Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name

| Part 4:         | Answer These Questions for Administrative and Statistical Records   |             |  |  |  |  |  |
|-----------------|---|-------------|--|--|--|--|--|
| _               | Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes   |             |  |  |  |  |  |
| Your famil      | What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. |             |  |  |  |  |  |
|                 | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$5,131.84   |             |  |  |  |  |  |
|                 | e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :   | Total claim |  |  |  |  |  |
| From P          | art 4 of Schedule E/F, copy the following:  |             |  |  |  |  |  |
| 9a. Dom         | estic support obligations (Copy line 6a.)   | \$_0.00     |  |  |  |  |  |
| 9b. Taxe        | es and certain other debts you owe the government. (Copy line 6b.)  | \$_600.00   |  |  |  |  |  |
| 9c. Clain       | ns for death or personal injury while you were intoxicated. (Copy line 6c.)   | \$_0.00     |  |  |  |  |  |
| 9d. Stud        | ent loans. (Copy line 6f.)  | \$_ 0.00    |  |  |  |  |  |
|                 | gations arising out of a separation agreement or divorce that you did not report as laims. (Copy line 6g.)  | \$_0.00     |  |  |  |  |  |
| 9f. Debt        | s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)  | \$_0.00     |  |  |  |  |  |
| 9g. <b>Tota</b> | I. Add lines 9a through 9f.   | \$_600.00   |  |  |  |  |  |

| Fill in this in  | Caso 17 272<br>formation to identify you   |  |  | Entered 12/15/17<br>0 of 60   | 16:33:30                            | Desc I        | Main                       |              |
|--|--|--|--|---|-------------------------------------|---------------|----------------------------|--------------|
| Dillord  | Dorothy  | Ann  | Syers  |   |                                     |               |                            |              |
| Debtor 1   | First Name   | Middle Name  | Last Name  |   |                                     |               |                            |              |
| Debtor 2   |  |  |  |   |                                     |               |                            |              |
| (Spouse, if filing)  | First Name   | Middle Name  | Last Name  |   |                                     |               |                            |              |
| United States  | Bankruptcy Court for the :   | NORTHERN District  | of <u>ILLINOIS</u><br>(State)                            |   |                                     | _             |                            |              |
| Case Number  |  |  | ——   |   |                                     | _             | Check if this              |              |
| (If known)   | orms 106 A /D  |  |  |   |                                     | а             | mended fili                | ng           |
|  | <u>orm 106A/B</u><br>e <b>A/B: Proper</b>  | tv.  |  |   |                                     |               |                            | 12/15        |
| n each categor<br>ategory where<br>esponsible for<br>ages, write you | y, separately list and des<br>you think it fits best. Be<br>supplying correct inforn<br>ur name and case numbe | scribe items. List an<br>as complete and ac<br>nation. If more space<br>er (if known). Answe | curate as possible. If two me is needed, attach a separa | fits in more than one categor<br>arried people are filing togeth<br>te sheet to this form. On the to<br>we an Interest In | er, both are equall                 | ly            |                            |              |
|  | n or have any legal or ed  | quitable interest in a   | ny residence, building, land                             | l, or similar property?   |                                     |               |                            |              |
| No.  | Describe   |  |  |   |                                     |               |                            |              |
| Tes.   | Describe   |  | What is the property? Chec                               | ck all that apply.  | Do not deduct s                     | secured claim | s or exemptior             | ıs. Put      |
| 3127 N 78  | 3th Ct   |  | Single-family home                                       |   | the amount of a                     | •             |                            |              |
| Street addre   | ess, if available, or other desc   | cription   | Duplex or multi-unit building                            | ng  |                                     |               |                            |              |
|  |  |  | Condominium or cooperat                                  |   | Current value of entire property    |               | Current val<br>portion you |              |
| <u>-</u> .   | <b>5</b> .   |  | Manufactured or mobile h                                 | ome   |                                     |               | <b>,</b> ,                 |              |
| Elmwood<br>City  |  | IL 60707<br>tate ZIP Code  | Land Investment property                                 |   | \$199                               | 9,046.00      | \$                         | 199,046.00   |
| City   | 3  | tate Zii Code  | Timeshare  |   |                                     |               |                            |              |
| County   |  |  | Other  |   | Describe the n<br>interest (such    | =             |                            | -            |
| •  |  |  | Who has an interest in the                               | nronerty? Check one   | the entireties,                     | -             | _                          | -            |
|  |  |  | Debtor 1 only  | property: Oncok one.  |                                     |               |                            |              |
|  |  |  | Debtor 2 only  |   |                                     |               |                            |              |
|  |  |  | Debtor 1 and Debtor 2 onl                                | ly  | _                                   |               | nmunity prop               | •            |
|  |  |  | At least one of the debtors                              | tors and another (see instructions)   |                                     |               |                            |              |
|  |  |  | Other information you wish property identification num   | n to add about this item, such  | as local                            |               |                            |              |
| 2 Add the del  | lar value of the nortion v   | rou own for all of you   | ur antrica fra Bart 1. includir                          | ag any entries for pages  |                                     |               |                            |              |
|  |  | <del>-</del>   | ur entries fro Part 1, includir                          | ig any entries for pages  |                                     |               |                            | \$199,046.00 |
|  | Describe Your Vehicles   |  |  |   |                                     |               |                            | Ψ133,040.00  |
|  | ease, or have legal or equ   | uitable interest in an   | y vehicles, whether they are                             | e registered or not? Include an   | y vehicles                          |               |                            |              |
| you own that so  | omeone else drives. If you   | u lease a vehicle, also  | o report it on Schedule G: Ex                            | ecutory Contracts and Unexpir   | red Leases.                         |               |                            |              |
| 03. Cars, vans   | s, trucks, tractors, sport (   | utility vehicles, moto   | orcycles   |   |                                     |               |                            |              |
| Yes.   | Describe //ake:  | Toyota   | Who has an interest in the                               | property? Check one.  | Do not deduct se                    | ecured claim  | s or evemption             | is Put       |
|  | Model:   | Camry  | Debtor 1 only  |   | the amount of ar                    | ny secured cl | laims on Sched             | dule D:      |
|  |  | 2003   | Debtor 2 only  |   | Creditors Who F                     |               |                            |              |
|  | 'ear:  |  | Debtor 1 and Debtor 2 onl                                | ly  | Current value of<br>entire property |               | Current value portion you  |              |
|  | Approximate Mileage:   | 168,000  | At least one of the debtors                              | s and another   |                                     |               |                            |              |
| C  | Other information:   |  | Chack if this is server                                  | unity property (222   | \$                                  | 1,259.00      | \$                         | 1,259.00     |
|  | 2003 Toyota Camry with c<br>miles  | over 168,000   | instructions)  | unity property (see   |                                     |               |                            |              |
| _  |  |  |  |   |                                     |               |                            |              |

Debtor 1 Dorothy Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main Page 11 of 60 Dorothy Page 11 of 60 Dorothy

O4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No.

Yes. Describe.....

5. Add the dollar value of the portion you own for all of your entries fro Part 2, including any entries for pages

\$1,259.00

|     |                              | -  | oortion you own for all of your entries fro Part 2, including any entries for pages 2. Write that number here                                |          | \$ 1,259.00  |
|-----|------------------------------|--|--|----------|--|
| ŀ   | Part 3:                      | Describe Your Per  | rsonal and Household Items   |          |  |
| Do  | you own o                    | or have any legal  | or equitable interest in any of the following items?   | <b>i</b> | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 06. |                              | ld goods and furn<br>: Major appliances, f                             | nishings<br>urniture, linens, china, kitchenware   |          |  |
|     | Yes                          | Describe   | Furniture, linens, Large and small appliances, table & chairs, bedroom set   | \$1,200  | \$ 1,200.00  |
| 07. |                              | : Televisions and rac  | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games |          | · <u></u>  |
|     | Yes                          | Describe   | Flat screen TV, computer, printer, music collection, cell phone  | \$300    | \$ 300.00  |
| 08. | Examples                     |  | nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles   |          | · <u></u>  |
|     | Yes.                         |  |  |          | \$0.00   |
| 09. | Examples                     | nt for sports and l<br>:: Sports, photograph<br>ks; carpentry tools; m | ic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes   |          |  |
|     | Yes.                         | Describe   |  |          | \$ <u> </u>  |
| 10. | Examples No.                 | : Pistols, rifles, shoto   | guns, ammunition, and related equipment  |          |  |
|     | Yes.                         | Describe   |  |          | \$0.00   |
| 11. | Examples No.                 | : Everyday clothes, f  | furs, leather coats, designer wear, shoes, accessories   |          |  |
|     | Yes                          | Describe   | Normal Clothing, Shoes, Accessories  | \$100    | \$ 100.00  |
| 12. | Jewelry Examples gold, silve |  | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,   |          | ·  |
|     | Yes                          | Describe   | Wedding Ring, Engagement Ring, Costume Jewelry   | \$200    | \$ 200.00  |
| 13. | Non-farm<br>Examples<br>No.  | animals<br>: Dogs, cats, birds, h                                      | norses   |          | <u> </u>   |
|     | Yes                          | Describe   |  |          | \$0.00   |

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Debtor 1

Desc Main

14. Any other personal and household items you did not already list, including any health aids you did not list Describe..... 0.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.800.00 Describe Your Financial Assets Part 4: Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes. Describe..... 0.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No. Describe..... Account Type: Institution name: Yes. Checking Account **US Bank** 200.00 200.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No. Yes. Describe..... Institution or issuer name: 0.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in Describe..... Name of Entity and Percent of Ownership: Yes 0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No. Describe..... Issuer name: Yes. 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No. Describe..... Type of account and Institution name: 401(k) or similar plan Through Employer Unknown 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No. Yes. Describe..... Institution name or individual: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No. Describe..... Issuer name and description: Yes. North American Company for Life and Health Insurance 9,154.00 9,154.00 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No. Describe..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 0.00

Case 17-37228 Dorothy Debtor 1

Doc 1

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Last Name

Desc Main

Middle Name

| 25. | Trusts, equ             | itable or future                         | interests in property (other than anything listed in line 1), and rights or powers  |            |   |          |
|-----|-------------------------|--|---|------------|---|----------|
|     | Yes.                    | Describe                                 |   |            |   |          |
| 26  | Datente co              | nvriahte trader                          | narks, trade secrets, and other intellectual property   |            | \$  | 0.00     |
| _0. |                         |  | nes, websites, proceeds from royalties and licensing agreements   |            |   |          |
|     | Yes.                    | Describe                                 |   |            | \$  | 0.00     |
| 27. | -                       | •  | other general intangibles   |            |   |          |
|     | No.                     | Building permits, ex                     | clusive licenses, cooperative association holdings, liquor licenses, professional licenses                                      |            |   |          |
|     | Yes.                    | Describe                                 |   |            | \$  | 0.00     |
|     |                         |  |   |            |   |          |
| Мо  | ney or prop             | erty owed to you                         | 1?  |            | Current value of the portion you own? Do not deduct secured or exemptions |          |
| 28. | Tax refund              | s owed to you                            |   |            |   |          |
|     | Yes.                    | Describe                                 |   |            | •   | 0.00     |
| 29. | Family sup<br>Examples: | -  | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement                                |            | <u> </u>  |          |
|     | Yes.                    | Describe                                 |   |            | •   | 0.00     |
| 30. | Other amo               | unts someone o                           | wes you   |            | <u> </u>  |          |
|     |                         |  | bility insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else |            |   |          |
|     | Yes.                    | Describe                                 |   |            | \$  | 0.00     |
| 31. |                         | insurance polici                         | es I life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance                                   |            |   |          |
|     | No.                     | · ·                                      | Company Name & Beneficiary:   |            |   |          |
|     | Yes.                    | Describe                                 |   |            |   |          |
|     |                         |  | · · ·   | \$0<br>\$0 | \$  | 0.00     |
| 32. | Any interes             | st in property th                        | at is due you from someone who has died   |            | <u> </u>  |          |
|     | -                       | e beneficiary of a I<br>cause someone ha | ving trust, expect proceeds from a life insurance policy, or are currently entitled to receive s died.                          |            |   |          |
|     | Yes.                    | Describe                                 |   |            | \$  | 0.00     |
| 33. | _                       | -  | s, whether or not you have filed a lawsuit or made a demand for payment nent disputes, insurance claims, or rights to sue       |            | Ψ   |          |
|     | Yes.                    | Describe                                 |   |            | •   | 0.00     |
| 34. | Other cont              | ingent and unliq                         | uidated claims of every nature, including counterclaims of the debtor and rights  |            | \$  | <u> </u> |
|     | Yes.                    | Describe                                 |   |            | \$  | 0.00     |
| 35. | Any financ              | ial assets you d                         | d not already list  |            |   |          |
|     | Yes.                    | Describe                                 |   |            | \$  | 0.00     |
| 36. | Add the do              | llar value of all o                      | of your entries from Part 4, including any entries for pages you have attached  |            |   |          |
|     | for Part 4. V           | Vrite that numbe                         | r here>   |            | \$  | 9,354.00 |

Debtor 1

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— Document Page 14 of 600 Page 14 of 16 (if known) Doc 1 Desc Main Dorothy Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... 0.00 41. Inventory No. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations Yes. Describe..... 0.00 44. Any business-related property you did not already list No. Yes. Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... Yes. 0.00 48. Crops-either growing or harvested No. Yes. Describe.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No. Yes.

Describe.....

0.00

0.00

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 Document Page 15 of 60 Pag Case 17-372 Doc 1 Desc Main Debtor 1 50. Farm and fishing supplies, chemicals, and feed No. Describe..... Yes. 0.00 51. Any farm- and commercial fishing-related property you did not already list Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... --> List the Totals of Each Part of this Form Part 8: \$ 199,046.00 55. Part 1: Total real estate, line 2 \$1,259.00 56. Part 2: Total vehicles, line 5 \$1,800.00 57. Part 3: Total personal and household items, line 15 \$ 9,354.00 58. Part 4: Total financial assets, line 36 \$ 0.00 59. Part 5: Total business-related property, line 45 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52

61. Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61. .....

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$ 0.00

\$ 12,413.00

\$211,459.00

\$ 12,413.00

 Official Form 106A/B
 Record #
 756181
 Schedule A/B: Property
 Page 6 of 6

| Fill in this in     | Fill in this information to identify your case:  |             |           |  |  |  |  |  |
|---------------------|--|-------------|-----------|--|--|--|--|--|
| Debtor 1            | Dorothy  | Ann         | Syers     |  |  |  |  |  |
|                     | First Name   | Middle Name | Last Name |  |  |  |  |  |
| Debtor 2            |  |             |           |  |  |  |  |  |
| (Spouse, if filing) | First Name   | Middle Name | Last Name |  |  |  |  |  |
| United States       | United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) |             |           |  |  |  |  |  |
| Case Number         | -  |             | _         |  |  |  |  |  |
| (If known)          |  |             |           |  |  |  |  |  |

### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identif   | fy the Property You Claim as Exempt   |                                      |   |                                    |  |  |  |  |  |
|---|---|--------------------------------------|---|------------------------------------|--|--|--|--|--|
| 1. Which set of ex  | emptions are you claiming? Check  | one only, even if your spo           | ouse is filing with you.  |                                    |  |  |  |  |  |
| You are clai  | You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3) |                                      |   |                                    |  |  |  |  |  |
| You are clai  | ming federal exemptions. 11 U.S.C.  | § 522(b)(2)                          |   |                                    |  |  |  |  |  |
|   |   |                                      |   |                                    |  |  |  |  |  |
| 2. For any propert  | ty you list on <i>Schedule A/B</i> that you   | u claim as exempt, fill in t         | the information below.  |                                    |  |  |  |  |  |
| •   | on of the property and line on<br>that lists this property                          | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |  |  |  |
|   |   | Copy the value from Schedule A/B     | Check only one box for each exemption                           |                                    |  |  |  |  |  |
| Brief   | 3127 N 78th Ct Elmwood Park IL  | ¢ 198,164                            | \$ 30.000   | 735 ILCS 5/12-901                  |  |  |  |  |  |
| description:  | 60707 - Primary Residence   | \$ <u>198,164</u>                    | \$_30,000   | 735 ILCS 5/12-902                  |  |  |  |  |  |
| Line from   | 01  |                                      | 100% of fair market value, up to                                |                                    |  |  |  |  |  |
| Schedule A/B:   | <u>01</u>   |                                      | any applicable statutory limit                                  |                                    |  |  |  |  |  |
| Brief description:  | 2003 Toyota Camry with over 168,000 miles   | s 1,259                              | \$ 2,400  | 735 ILCS 5/12-1001(c)              |  |  |  |  |  |
| docomption.   |   | *                                    |   |                                    |  |  |  |  |  |
| Line from<br>Schedule A/B:  | 03  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief   | Furniture linear Lerge and small  |                                      | any approado diatatory infin                                    | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |
| description:  | Furniture, linens, Large and small appliances, table & chairs, bedroom              | \$ <u>1,200</u>                      | \$1,200   | 733 1236 3/12-100 1(b)             |  |  |  |  |  |
| Line from   | set   |                                      | 100% of fair market value, up to                                |                                    |  |  |  |  |  |
| Schedule A/B:   | 06  |                                      | any applicable statutory limit                                  |                                    |  |  |  |  |  |
| Brief   | Flat screen TV, computer, printer,  |                                      |   | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |
| description:  | music collection, cell phone  | \$_300                               | \$ _ 300  |                                    |  |  |  |  |  |
| Line from   |   |                                      | 100% of fair market value, up to                                |                                    |  |  |  |  |  |
| Schedule A/B:   | 07  |                                      | any applicable statutory limit                                  |                                    |  |  |  |  |  |
|   |   |                                      |   |                                    |  |  |  |  |  |
|   |   |                                      |   |                                    |  |  |  |  |  |
| Official Form 106C Record # 756181 Schedule C: The Property You Claim as Evennt Page 1 of 2 |   |                                      |   |                                    |  |  |  |  |  |
| Official Form 1060  | Record # /56181   | Scheaule C: I                        | he Property You Claim as Exempt                                 | Page 1 of 2                        |  |  |  |  |  |

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Dorothy Debtor 1

Desc Main

Page 17 of 60 Number (if known) Document Ann Middle Name Last Name Additional Page Part 2: Current value of the Amount of the exemption you claim Specific laws that allow exemption Brief description of the property and line on Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 735 ILCS 5/12-1001(a),(e) Brief Normal Clothing, Shoes, \$ 100 \$ 100 description: Accessories Line from 100% of fair market value, up to 11 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(a),(e) Brief Wedding Ring, Engagement Ring, \$ 200 200 description: Costume Jewelry 100% of fair market value, up to Line from 12 Schedule A/B: any applicable statutory limit Brief Checking Account, US Bank, 735 ILCS 5/12-1001(b) \$ 200 \$ 200 200.00 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Brief 401(k) or similar plan, Through 735 ILCS 5/12-1006 Unknown description: Employer Line from 100% of fair market value, up to 21 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(b) Brief North American Company for Life 9,154 2,250 and Health Insurance, 9,154.00 description: Line from 100% of fair market value, up to 23 Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) No. Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  $\prod_{No}$ ☐ Yes.

Schedule C: The Property You Claim as Exempt

|                     | Caso 17 2722                                   | Q Doc 1           | Eilad 12/15/17  | Entered 12/15/1   | 7 16:33:30                               | Desc Main                   |                          |
|---------------------|--|-------------------|---|---|--|-----------------------------|--------------------------|
| Fill in this in     | formation to identify your o                   | case:             |   | 8 of 60   |  |                             |                          |
| Debtor 1            | Dorothy  | Ann               | Syers   |   |  |                             |                          |
|                     | First Name                                     | Middle Name       | Last Name   |   |  |                             |                          |
| Debtor 2            |  |                   |   |   |  |                             |                          |
| (Spouse, if filing) | First Name                                     | Middle Name       | Last Name   |   |  |                             |                          |
| United States       | Bankruptcy Court for the : <u>NC</u>           | ORTHERN District  | of <u>ILLINOIS</u><br>(State)                                     |   |  |                             |                          |
| Case Number         | г  |                   |   |   |  | ☐ Check if this             |                          |
|                     | 4000   |                   |   |   |  | amended fil                 | ing                      |
| official F          | <u>orm 106D</u>                                |                   |   |   |  |                             |                          |
| chedule             | D: Creditors Who                               | o Have Cla        | ims Secured by I  | Property  |  |                             | 12/15                    |
|                     |  |                   |   | n are equally responsible for<br>ntries, and attach it to this fo |  | ny                          |                          |
|                     | es, write your name and cas                    | •                 | ,   |   | -  |                             |                          |
| `                   | ditors have claims secured                     |                   |   |   |  |                             |                          |
| ∐ No. Ch            | neck this box and submit this                  | form to the court | with your other schedules. Yo                                     | ou have nothing else to report                                    | on this form.                            |                             |                          |
| Yes. Fil            | Il in all of the information belo              | OW.               |   |   |  |                             |                          |
| Part 1:             | List All Secured Claims                        |                   |   |   |  |                             |                          |
|                     |  |                   |   |   | Column A                                 | Column A                    | Column C                 |
|                     |  |                   | secured claim, list the creditors claim, list the other creditors | •   | Amount of claim                          | Value of collateral         | Unsecured                |
|                     |  | •                 | according to the creditors na                                     |   | Do not deduct the<br>value of collateral | that supports this<br>claim | <b>portion</b><br>If any |
| 2.1 BK OF           | AMER   | De                | scribe the property that secur                                    | es the claim:   | <b>\$</b> 161,175.00                     | <b>\$</b> 198,164.00        | \$_0.00                  |
| Creditor's          |  |                   | 27 N 78th Ct Elmwood Park I                                       |   | 7  |                             |                          |
| 4909 Sa             | avarese Cir                                    |                   | sidence   | ,   |  |                             |                          |
| Number              | Street   |                   |   |   |  |                             |                          |
|                     |  |                   | of the date you file, the claim Contingent                        | is: Check all that apply.   |  |                             |                          |
| Tampa               | FL 33  | 3634              | Unliquidated  |   |  |                             |                          |
| City                | State Zi                                       | ip Code           | Disputed  |   |  |                             |                          |
| Who owes            | s the debt? Check one.                         | Na                | ture of Lien. Check all that appl                                 | y.  |  |                             |                          |
| Debtor              | •  |                   | An agreement you made (such a                                     | s mortgage or secured   |  |                             |                          |
| Debtor              | 2 only<br>1 and Debtor 2 only                  | Г                 | car loan)<br>Statutory lien (such as tax lien, n                  | nechanic's lien)  |  |                             |                          |
| =                   | one of the debtors and another                 |                   | Judgment lien from a lawsuit                                      | ,   |  |                             |                          |
| □ chask             | if this plains values to a                     |                   | Other (including a right to offset)                               |   |  |                             |                          |
|                     | if this claim relates to a unity debt          |                   |   |   |  |                             |                          |
| Date Debt           | was incurred2005-201                           | 7 Las             | at 4 digits of account number                                     | <u>2547</u>   |  |                             |                          |
| 2.2 Midwes          | st Title Loans                                 | De:               | scribe the property that secur                                    | es the claim:   | \$ <u>1,595.00</u>                       | \$ <u>1,259.00</u>          | \$ <u>336.00</u>         |
| Creditor's          | Name<br>/. 79th St.                            | 200               | 03 Toyota Camry with over 10                                      | 68,000 miles  |  |                             |                          |
| Number              | Street   |                   |   |   |  |                             |                          |
|                     |  | As                | of the date you file, the claim                                   | is: Check all that apply.   | _  |                             |                          |
| Chicago             | o IL 60  | 1652 <b>=</b>     | Contingent  |   |  |                             |                          |
| City                | State Zi                                       | in Code           | Unliquidated<br>Disputed  |   |  |                             |                          |
| Who owes            | s the debt? Check one.                         |                   | cure of Lien. Check all that appl                                 | lv.   |  |                             |                          |
| Debtor              |  |                   | An agreement you made (such a                                     |   |  |                             |                          |
| Debtor              | 2 only   | _                 | car loan)   |   |  |                             |                          |
| Debtor              | 1 and Debtor 2 only                            |                   | Statutory lien (such as tax lien, n                               | nechanic's lien)  |  |                             |                          |
| At least            | one of the debtors and another                 | Ę                 | Judgment lien from a lawsuit                                      |   |  |                             |                          |
| Check               | if this claim relates to a                     | L                 | Other (including a right to offset)                               |   |  |                             |                          |
|                     | unity debt                                     | l or              | st 4 digits of account number                                     |   |  |                             |                          |
|                     | was incurred<br>lollar value of your entries i |                   | is page. Write that number  |   | \$ 162,770.00                            |                             |                          |
|                     | ,        |                   |   |   |  |                             |                          |

Debtor 1 Dorothy Ann Dorothy Page 19 of 60 Case Number (if known)

| Part | Additional Page  After Isiting any entries on this page, by 2.4, and so forth. | number them beginning with 2.3, followed                     | Column A  Amount of claim  Do not deduct the value of collateral | Column A  Value of collateral that supports this claim | Column C Unsecured portion If any |
|------|--|--|--|--|-----------------------------------|
| 2.3  | Select Portfolio Svcin   | Describe the property that secures the claim:                | \$ <u>18,752.00</u>  | \$ <u>198,164.00</u>                                   | \$ <u>0.00</u>                    |
|      | Creditor's Name Po Box 65250 Number Street                                     | 3127 N 78th Ct Elmwood Park IL 60707 - Primary<br>Residence  |  |  |                                   |
|      |  | As of the date you file, the claim is: Check all that apply. | _  |  |                                   |
|      | Salt Lake City UT 84165  | ☐Contingent ☐Unliquidated                                    |  |  |                                   |
|      | City State Zip Code  | Disputed   |  |  |                                   |
| w    | /ho owes the debt? Check one.  | Nature of Lien. Check all that apply.                        |  |  |                                   |
|      | Debtor 1 only  | An agreement you made (such as mortgage or secured           |  |  |                                   |
|      | Debtor 2 only  | car loan)  |  |  |                                   |
|      | Debtor 1 and Debtor 2 only   | Statutory lien (such as tax lien, mechanic's lien)           |  |  |                                   |
|      | At least one of the debtors and another  | Judgment lien from a lawsuit                                 |  |  |                                   |
|      | Check if this claim relates to a community debt                                | Other (including a right to offset)                          |  |  |                                   |
| D    | ate Debt was incurred2006-2017   | Last 4 digits of account number5408                          |  |  |                                   |

List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Add the dollar value of your entries in Column A on this page. Write that number here:

\$<u>181,522.00</u>

Part 2:

|                                |  | Caso 17 2722  | Q Doc 1  | Filod 12/15/17  | Entered 12/15/17 1   | 6:33:30                            | Desc Main                   |             |
|--------------------------------|--|---|--|---|--|------------------------------------|-----------------------------|-------------|
| Fi                             | ll in this inf   | formation to identify your c                                  | ase:   |   | 0 of 60  | 0.00.00                            | Desc Main                   |             |
| D                              | ebtor 1  | Dorothy   | Ann  | Syers   |  |                                    |                             |             |
|                                |  | First Name  | Middle Name  | Last Name   |  |                                    |                             |             |
|                                | ebtor 2  | Floribles   | Middle Nove  | LastName  |  |                                    |                             |             |
| (5                             | pouse, if filing)  | First Name  | Middle Name  | Last Name   |  |                                    |                             |             |
| U                              | nited States I   | Bankruptcy Court for the : <u>NC</u>                          | <u>ORTHERN</u> District  | of <u>ILLINOIS</u><br>(State)   |  |                                    |                             |             |
|                                | ase Number   |   |  |   |  |                                    | <del>-</del>                | this is an  |
|                                |  | 1005/5  |  |   |  |                                    | amende                      | a tiling    |
| <u> Jtt</u>                    | icial Fo   | orm 106E/F  |  |   |  |                                    |                             |             |
| Scł                            | <u>redule</u>  | E/F: Creditors W  | ho Have U  | nsecured Claims   | i  |                                    |                             | 12/15       |
| A/B:<br>credit<br>need<br>op o | Property (Cotors with part ded, copy the fany additionant 1: | Official Form 106A/B) and o<br>artially secured claims that   | n Schedule G: Extare listed in Schonumber the entrience and case number the course of the course | recutory Contracts and Une<br>edule D: Creditors Who Hat<br>is in the boxes on the left. A<br>per (if known). | a claim. Also list executory contrexpired Leases (Official Form 106 ve Claims Secured by Property. It also the Continuation Page to the Continuati | G). Do not incl<br>f more space is | ude any                     |             |
|                                | Yes.   |   |  |   |  |                                    |                             |             |
| r<br>U                         | nonpriority a<br>unsecured o                                 | amounts. As much as possib<br>claims, fill out the Continuati | ole, list the claims<br>on Page of Part 1.   | in alphabetical order accordi   | iority amounts, list that claim here and to the creditor's name. If you hall be a particular claim, list the other uction booklet.)  | ve more than to                    | wo priority rt 3.  Priority | Nonpriority |
| 0.4                            | IRS Prio   | ority Debt  | Loo  | t 4 digita of account number  |  | <b>\$</b> 600.00                   | amount<br>\$ 600.00         | s 0.00      |
| 2.1                            | Creditor's N   |   | Las  | t 4 digits of account number  |  | Ψ                                  | <u> </u>                    | Ψ_0:00      |
|                                | PO Box   |   | Wh   | en was the debt incurred?   | 2016   |                                    |                             |             |
|                                | Number   | Street  | _  |   |  |                                    |                             |             |
|                                |  |   |  | of the date you file, the claim   | is: Check all that apply.  |                                    |                             |             |
|                                | Philadel   | phia PA 19  | 101  | Contingent  |  |                                    |                             |             |
|                                | City   | State Zi  | p Code   | Unliquidated<br>Disputed  |  |                                    |                             |             |
|                                | _  | the debt? Check one.  | Ц  | Біораїса  |  |                                    |                             |             |
|                                | Debtor 1   | •   | T  | a of DDIODITY   |  |                                    |                             |             |
|                                | =  | •   |  | e of PRIORITY unsecured cla<br>Domestic support obligations   | um:  |                                    |                             |             |
|                                | =  | and Debtor 2 only one of the debtors and another              |  | Taxes and certain other debts yo  | ou owe the government  |                                    |                             |             |
|                                | =  |   | _  | raxes and seriam serier debte ye  | ou one the government  |                                    |                             |             |
|                                | _  | if this claim relates to a<br>mity debt                       | П  | Claims for death or personal inju   | rv while you were  |                                    |                             |             |
|                                |  | n subject to offest?  | _  | intoxicated   | , .,   |                                    |                             |             |
|                                | No   |   |  | Other. Specify  |  |                                    |                             |             |
|                                | Yes  |   |  |   |  |                                    |                             |             |
| Pa                             | art 2:   | ist All of Your NONPRIORITY                                   | Unsecured Claim  | S   |  |                                    |                             |             |
| 3.                             | o any crec   | litors have nonpriority uns                                   | ecured claims ag   | ainst you?  |  |                                    |                             |             |
|                                | No. You  | u have nothing to report in the                               | nis part. Submit th  | is form to the court with you   | other schedules.   |                                    |                             |             |
|                                | Yes.   |   |  |   |  |                                    |                             |             |
| r                              | nonpriority to   | unsecured claim, list the cree                                | ditor separately for<br>ditor holds a partic   | each claim. For each claim  | or who holds each claim. If a cred listed, identify what type of claim it itors in Part 3.If you have more tha   | is. Do not list o                  | laims already               |             |
|                                |  | -   |  |   |  |                                    |                             | Total claim |

| Debtor 1 | Dorothy Ann  | Regument Page 21 of 60 Page 21 |                    |
|----------|--|--|--------------------|
|          | First Name Middle Name                             | Last Name  | 4 000 00           |
| 4.1      | Check n' Go  | Last 4 digits of account number  | \$ <u>1,000.00</u> |
|          | Creditor's Name<br>5638 W. Fullerton               | When was the debt incurred?  |                    |
|          |  | when was the dept incurred?  |                    |
|          | Number Street                                      |  |                    |
|          |  | As of the date you file, the claim is: Check all that apply.   |                    |
|          | Chicago IL 60630                                   | Contingent   |                    |
|          | City State Zip Code                                | Unliquidated   |                    |
| v        | Who owes the debt? Check one.                      | Disputed   |                    |
|          | Debtor 1 only                                      |  |                    |
| ΙĒ       | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
| lī       | Debtor 1 and Debtor 2 only                         | Student loans  |                    |
| l ř      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
| 7        | Check if this claim relates to a                   | that you did not report as priority claims   |                    |
| -        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                    |
| ls       | s the claim subject to offest?                     | <b>-</b>   |                    |
|          | No   | Other. Specify PayDay Loan   |                    |
|          | Yes  |  |                    |
| 4.2      | Clts in Cardiovasc Med                             | Last 4 digits of account number 7002   | \$ <u>80.00</u>    |
|          | Creditor's Name                                    |  |                    |
|          | PO Box 3170  | When was the debt incurred?  |                    |
|          | Number Street                                      |  |                    |
|          |  | As of the date you file, the claim is: Check all that apply.   |                    |
|          |  | Contingent   |                    |
|          | Carol Stream IL 60132                              | Unliquidated   |                    |
| ١,,,     | City State Zip Code  Who owes the debt? Check one. | Disputed   |                    |
| "        | =  | □  |                    |
| H        | Debtor 1 only                                      |  |                    |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
|          | Debtor 1 and Debtor 2 only                         | ☐ Student loans  |                    |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
| L        | Check if this claim relates to a                   | that you did not report as priority claims   |                    |
|          | community debt<br>s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|          | No   | Madical Daht   |                    |
| 1 7      | Yes  | Other. Specify Medical Debt  |                    |
| 4.3      | COMENITY BANK/Carsons                              | Last 4 digits of account number NULL   | <b>\$</b> 330.00   |
| 4.3      | Creditor's Name                                    | Last 4 digits of account number  | ·                  |
|          | Po Box 182789                                      | When was the debt incurred? 2014-2017  |                    |
|          | Number Street                                      |  |                    |
|          |  | As of the date you file, the claim is: Check all that apply.   |                    |
|          |  | Contingent   |                    |
|          | Columbus OH 43218                                  |  |                    |
|          | City State Zip Code                                | Unliquidated   |                    |
| <u> </u> | Vho owes the debt? Check one.                      | Disputed   |                    |
|          | Debtor 1 only                                      |  |                    |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
|          | Debtor 1 and Debtor 2 only                         | Student loans  |                    |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
| Ē        | Check if this claim relates to a                   | that you did not report as priority claims   |                    |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                    |
| ls       | s the claim subject to offest?                     |  |                    |
|          | No   | Other. Specify Credit Card or Credit Use   |                    |
|          | Yes  | <del>-</del>   |                    |

Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main Case 17-37228 Doc 1 Page 22 of 60 Case Number (if known) **Document** Dorothy Ann Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.4 Dependon Collection Service                   | Last 4 digits of account number                                   | \$ <u>0.00</u>   |
|---|---|------------------|
| Creditor's Name                                   | <u> </u>  |                  |
| PO Box 4833                                       | When was the debt incurred?                                       |                  |
| Number Street                                     |   |                  |
|   | As of the date you file, the claim is: Check all that apply.      |                  |
| Oak Breek II 00500                                | Contingent  |                  |
| Oak Brook IL 60523                                | Unliquidated  |                  |
| City State Zip Code Who owes the debt? Check one. | Disputed  |                  |
| Debtor 1 only                                     |   |                  |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                  |
| Debtor 1 and Debtor 2 only                        | Student loans   |                  |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                  |
| Check if this claim relates to a                  | that you did not report as priority claims                        |                  |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts |                  |
| Is the claim subject to offest?                   | Credit Cord or Credit Lloo  |                  |
| Yes   | Other. Specify Credit Card or Credit Use                          |                  |
| 4.5 Discover FIN SVCS LLC                         | Last 4 digits of account number NULL                              | <b>\$</b> 765.00 |
| Creditor's Name                                   | 0047.0047   |                  |
| Po Box 15316                                      | When was the debt incurred? $\frac{2017-2017}{}$                  |                  |
| Number Street                                     |   |                  |
|   | As of the date you file, the claim is: Check all that apply.      |                  |
| Wilmington DE 10050                               | Contingent  |                  |
| Wilmington DE 19850  City State Zip Code          | Unliquidated  |                  |
| Who owes the debt? Check one.                     | Disputed  |                  |
| Debtor 1 only                                     |   |                  |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                  |
| Debtor 1 and Debtor 2 only                        | Student loans   |                  |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                  |
| Check if this claim relates to a                  | that you did not report as priority claims                        |                  |
| community debt Is the claim subject to offest?    | Debts to pension or profit-sharing plans, and other similar debts |                  |
| No  | Other. Specify Credit Card or Credit Use                          |                  |
| Yes   | Other. Specify Oredit Card of Credit Ose                          |                  |
| 4.6 Gottlieb Memorial Hospital                    | Last 4 digits of account number                                   | \$ 0.00          |
| Creditor's Name                                   |   |                  |
| PO Box 74867                                      | When was the debt incurred?                                       |                  |
| Number Street                                     |   |                  |
|   | As of the date you file, the claim is: Check all that apply.      |                  |
| Chicago IL 60694                                  | Contingent  |                  |
|   | Unliquidated  |                  |
| City State Zip Code Who owes the debt? Check one. | Disputed  |                  |
| Debtor 1 only                                     |   |                  |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                  |
| Debtor 1 and Debtor 2 only                        | Student loans   |                  |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                  |
| Check if this claim relates to a                  | that you did not report as priority claims                        |                  |
| community debt  Is the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts |                  |
| No  | Other. Specify Medical/Dental Services                            |                  |
| Yes   | Other. Specify  |                  |

Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main Case 17-37228 Page 23 of 60 Case Number (if known) **Document** Dorothy Ann Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim Great Lakes Financial Services** \$ 91,617.00 Last 4 digits of account number \_ Creditor's Name 322 S. Green, Ste. 150 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60607 Chicago Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Debt Owed Yes Illinois Collection Service \$ 7,000.00 Last 4 digits of account number 4.8 Creditor's Name PO Box 1010 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Tinley Park 60477 IL Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify \_\_\_ Credit Card or Credit Use Yes Jayanti G Patel MD \$ 0.00 4.9 Last 4 digits of account number Creditor's Name 6834 W Cermak Rd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Berwyn 60402 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only

Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main Case 17-37228 Page 24 of 60 Case Number (if known) \_\_\_ **Document** Dorothy Ann Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.10     | Loyola Univ. Med. Center                           | Last 4 digits of account number <u>5896</u>                       | \$ <u>0.00</u> |
|----------|--|---|----------------|
|          | Creditor's Name                                    |   |                |
|          | PO BOx 3266  | When was the debt incurred?                                       |                |
|          | Number Street                                      |   |                |
|          |  | As of the date you file, the claim is: Check all that apply.      |                |
|          |  | Contingent  |                |
|          | Milwaukee WI 53201                                 | Unliquidated  |                |
| ١,       | City State Zip Code  Who owes the debt? Check one. | Disputed  |                |
|          | Debtor 1 only                                      | _   |                |
| İ        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                |
| İ        | Debtor 1 and Debtor 2 only                         | Student loans   |                |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
|          |  | that you did not report as priority claims                        |                |
| 1        | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts |                |
| l l      | s the claim subject to offest?                     |   |                |
|          | No   | Other. Specify Medical/Dental Service                             |                |
|          | Yes  |   |                |
| 4.11     | Metro Center for Health                            | Last 4 digits of account number                                   | \$ <u>0.00</u> |
|          | Creditor's Name                                    |   |                |
|          | 500 E. Ogden Ave., Ste. C                          | When was the debt incurred?                                       |                |
|          | Number Street                                      |   |                |
|          |  | As of the date you file, the claim is: Check all that apply.      |                |
|          |  | Contingent  |                |
|          | Hinsdale IL 60521                                  | Unliquidated  |                |
| ١ ٧      | City State Zip Code  Who owes the debt? Check one. | Disputed  |                |
| [        | Debtor 1 only                                      | _   |                |
| İ        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans   |                |
| l i      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
| l        | Check if this claim relates to a                   | that you did not report as priority claims                        |                |
| L        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                |
| <u> </u> | s the claim subject to offest?                     |   |                |
|          | No   | Other. Specify Medical/Dental Services                            |                |
|          | Yes  |   |                |
| 4.12     | Pulmonary Medicine Associates                      | Last 4 digits of account number                                   | \$ <u>0.00</u> |
|          | Creditor's Name                                    | When was the debt insurred?                                       |                |
|          | 7607 W Madison                                     | When was the debt incurred?                                       |                |
|          | Number Street                                      |   |                |
|          |  | As of the date you file, the claim is: Check all that apply.      |                |
|          | Forest Park IL 60130                               | Contingent  |                |
|          |  | Unliquidated  |                |
| v        | City State Zip Code  Who owes the debt? Check one. | Disputed  |                |
|          | Debtor 1 only                                      |   |                |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                |
| [        | Debtor 1 and Debtor 2 only                         | Student loans   |                |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                |
| 1 '      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                |
| !        | s the claim subject to offest?                     |   |                |
|          | No   | Other. Specify Medical Debt                                       |                |
|          | Yes  |   |                |

Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main Ann Page 25 of 60 (If known)

| Debtor 1  | Dorothy                        | Ann                         | Layersumem Page 25 01 60 Case Number (if known)                                      |                    |
|-----------|--------------------------------|-----------------------------|--|--------------------|
|           | First Name                     | Middle Name                 | Last Name  |                    |
| Pari      | Your NONPRIO                   | RITY Unsecured Claims -     | Continuation Page  |                    |
| After lie | ting any entries on t          | this page number them       | hosinning with 4.4 followed by 4.5 and so forth                                      | Total Claim        |
| After its | sting any entries on t         | this page, number them      | beginning with 4.4, followed by 4.5, and so forth.                                   | Total Claim        |
| 4.13      | Turner Acceptance              | CRP                         | Last 4 digits of account number 4437   | <b>\$</b> 919.00   |
|           | Creditor's Name                |                             |  |                    |
|           | 5900 W Howard St               |                             | When was the debt incurred? 2017-2017  |                    |
|           | Number Street                  |                             |  |                    |
|           |                                |                             | As of the date you file, the claim is: Check all that apply.                         |                    |
|           | 0                              |                             | Contingent   |                    |
|           | Skokie                         | IL 60077                    | Unliquidated   |                    |
| l v       | City<br>/ho owes the debt? Ch  | State Zip Code neck one.    | Disputed   |                    |
|           | Debtor 1 only                  |                             |  |                    |
|           | Debtor 2 only                  |                             | Type of NONPRIORITY unsecured claim:   |                    |
|           | Debtor 1 and Debtor 2          | 2 only                      | Student loans  |                    |
|           | At least one of the deb        | otors and another           | Obligations arising out of a separation agreement or divorce                         |                    |
|           | Check if this claim r          | relates to a                | that you did not report as priority claims   |                    |
| .         | community debt                 |                             | Debts to pension or profit-sharing plans, and other similar debts                    |                    |
| IS        | s the claim subject to offest? |                             |  |                    |
|           | No<br>Yes                      |                             | Other. Specify Personal Loan   |                    |
| 4.14      | US BANK                        |                             | Last 4 digits of account number NULL   | <b>\$</b> 1,987.00 |
| 7.17      | Creditor's Name                |                             |  | •                  |
|           | 4325 17Th Ave S                |                             | When was the debt incurred? 2017-2017  |                    |
|           | Number Street                  |                             |  |                    |
|           |                                |                             | As of the date you file, the claim is: Check all that apply.                         |                    |
|           |                                |                             | Contingent   |                    |
|           | Fargo                          | ND 58125                    | Unliquidated   |                    |
| w         | City<br>/ho owes the debt? Ch  | State Zip Code<br>neck one. | Disputed   |                    |
|           | Debtor 1 only                  |                             | _  |                    |
| lē        | Debtor 2 only                  |                             | Type of NONPRIORITY unsecured claim:   |                    |
| ΙĒ        | Debtor 1 and Debtor 2          | 2 only                      | Student loans  |                    |
|           | At least one of the deb        | otors and another           | Obligations arising out of a separation agreement or divorce                         |                    |
| ΙĒ        | Check if this claim r          | relates to a                | that you did not report as priority claims   |                    |
| -         | community debt                 |                             | Debts to pension or profit-sharing plans, and other similar debts                    |                    |
| Is        | the claim subject to o         | offest?                     | _  |                    |
|           | No                             |                             | Other. Specify Credit Card or Credit Use   |                    |
|           | Yes                            |                             |  |                    |
| Par       | List Others to                 | Be Notified for a Debt Th   | at You Aiready Listed  |                    |
| 5 Hea     | this nage only if you          | have others to be notified  | about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For       |                    |
|           |                                |                             | rom you for a debt you owe to someone else, list the original creditor in Parts 1 or |                    |

Schedule E/F: Creditors Who Have Unsecured Claims

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Dorothy

Ann

Page 26 of 60 Case Number (if known)

Add the Amounts for Each Type of Unsecured Claim

| 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|----|---|---|
|    | Add the amounts for each type of unsecured claim.       |   |

|                          |   |     | Total claim  |
|--------------------------|---|-----|--------------|
| Total claims from Part 1 | 6a. Domestic support obligations  | 6a. | \$0.00       |
|                          | 6b. Taxes and Certain other debts you owe the government  | 6b. | \$600.00     |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c. | \$0.00       |
|                          | 6d. <b>Other.</b> Add all other priority unsecured claims.  Write that amount here.                         | 6d. | \$0.00       |
|                          | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e. | \$600.00     |
|                          |   |     | Total claim  |
| Total claims from Part 2 | 6f. Student loans   | 6f. | \$0.00       |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00       |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$0.00       |
|                          | 6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$103,698.00 |
|                          |   |     |              |

| Fil             | ll in this in                             | Caso 17<br>formation to iden                        | 7 27229 Doc 1  | Eilad 12/15/17                                 | Entered 12/15/17 16:33:30<br>7 of 60   | Desc Main           |
|-----------------|---|---|--|--|--|---------------------|
| D               | obtor 1                                   | Dorothy   | Ann  | Syers  |  |                     |
| Di              | ebtor 1                                   | First Name  | Middle Name  | Last Name                                      |  |                     |
|                 | ebtor 2<br>pouse, if filing)              | First Name  | Middle Name  | Last Name                                      |  |                     |
|                 |   | Rankruptov Court fo                                 | or the : <u>NORTHERN</u> District  | t of ILLINOIS                                  |  |                     |
|                 | ase Number                                |   | in the . <u>NORTHERN</u> DISTILL   | (State)  |  | Check if this is an |
|                 | f known)                                  |   |  |  |  | amended filing      |
| Off             | icial F                                   | orm 106G  |  |  |  |                     |
| Sch             | nedule                                    | G: Execut   | ory Contracts ar   | nd Unexpired Lea                               | ses  | 12/1                |
| nforr<br>additi | mation. If n<br>ional page:<br>Do you hav | nore space is needs, write your named any executory | eded, copy the additional p<br>ne and case number (if kno<br>contracts or unexpired lead | age, fill it out, number the e<br>wn).<br>ses? | h are equally responsible for supplying correct ntries, and attach it to this page. On the top of a  | ny                  |
| -               | _   |   |  |  | ou have nothing else to report on this form.   |                     |
| L               | → Yes. Fill                               | in all of the infor                                 | mation below even if the cor   | tracts or leases are listed in                 | Schedule A/B: Property (Official Form 106A/B)  |                     |
| e               |   | nt, vehicle lease,                                  |  |  | e. Then state what each contract or lease is for (truction booklet for more examples of executory co |                     |
|                 | Person or                                 | company with w                                      | hom you have the contract  | or lease                                       | State what the contract or leas  | e is for            |
| 2.1             |   |   |  |  |  |                     |
|                 | Name                                      |   |  |  | -  |                     |
|                 | Number                                    | Street  |  |  | -  |                     |
|                 | City                                      |   | State  | Zip Code                                       | -  |                     |
| 2.2             |   |   |  |  |  |                     |
|                 | Name                                      |   |  |  | -  |                     |
|                 | Number                                    | Street  |  |  | -  |                     |
|                 | City                                      |   | State  | Zip Code                                       | -  |                     |
| 2.3             |   |   |  |  |  |                     |
|                 | Name                                      |   |  |  | -  |                     |
|                 | Number                                    | Street  |  |  | -  |                     |
|                 | City                                      |   | State  | Zip Code                                       | -  |                     |
| 2.4             |   |   |  |  |  |                     |
|                 | Name                                      |   |  |  | -  |                     |
|                 | Number                                    | Street  |  |  | -  |                     |
|                 | City                                      |   | State  | Zip Code                                       | _  |                     |
| 2.5             |   |   |  |  |  |                     |
|                 | Name                                      |   |  |  | -  |                     |
|                 | Number                                    | Street  |  |  | -  |                     |

State Zip Code

City

| Fill in this in     | nformation to identi | ify your case:                      |              |
|---------------------|----------------------|-------------------------------------|--------------|
| Debtor 1            | Dorothy              | Ann                                 | Syers        |
|                     | First Name           | Middle Name                         | Last Name    |
| Debtor 2            |                      |                                     |              |
| (Spouse, if filing) | First Name           | Middle Name                         | Last Name    |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ |              |
| Case Number         | r                    |                                     | (State)      |
| (If known)          |                      |                                     | <del>-</del> |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, wr | te your name and case numbe  | r (if known). Answer every     | question.           |  |
|-------------|---------------------|--|--------------------------------|---------------------|--|
| 1. <b>D</b> | o you have any coo  | ebtors? (If you are filing a joint                                       | case, do not list either spous | se as a codebtor.)  |  |
|             | No.                 |  |                                |                     |  |
|             | Yes                 |  |                                |                     |  |
|             | =                   | s, have you lived in a commur<br>aho, Lousiiana, Nevada, New M           |                                |                     | roperty states and territories include<br>Visconsin.)                            |
|             | No. Go to line 3.   |  |                                |                     |  |
|             | Yes. Did your sp    | ouse, former spouse, or legal ed   | uivalent live with you at the  | time?               |  |
|             | _                   | n community state or territory die                                       | d you live?                    | Fill in the n       | ame and current address of that person.  |
|             | Name of your spo    | use, former spouse or legal equivalent                                   |                                |                     |  |
|             | Number St           | reet   |                                |                     |  |
|             | City                |  | State                          | Zip Code            |  |
| 3 In        | -                   | f vour codebtors. Do not inclu   |                                | •                   | is filing with you. List the person  |
|             |                     | Form 106D), Schedule E/F (Off<br>edule G to fill out Column 2.<br>debtor | icial Form 106E/F), or Sche    | dule G (Official Fo | Column 2: The creditor to whom you owe the debt  Check all schedules that apply: |
| 3.1         |                     |  |                                |                     | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |
| 3.2         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                | _                   | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            | _  |
| 3.3         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |

Official Form 106H Record # 756181 Schedule H: Your Codebtors Page 1 of 1

|                     |                          |                                | 1701.11111 <del>.</del> 111 | <u> </u>                                |
|---------------------|--------------------------|--------------------------------|-----------------------------|---|
| Fill in this in     | formation to identify    | your case:                     |                             |   |
| Debtor 1            | Dorothy                  | Ann                            | Syers                       |   |
|                     | First Name               | Middle Name                    | Last Name                   |   |
| Debtor 2            |                          |                                |                             |   |
| (Spouse, if filing) | First Name               | Middle Name                    | Last Name                   |   |
|                     | Bankruptcy Court for the | e : <u>NORTHERN DISTRICT C</u> | PF ILLINOIS                 | Check if this is:                       |
| (If known)          |                          |                                |                             | An amended filing                       |
|                     |                          |                                |                             | A supplement showing post-petition      |
|                     |                          |                                |                             | chapter 13 income as of the following d |
| Official F          | orm 106I                 |                                |                             | MM / DD / YYYY                          |

# Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Tit 1: Describe Employment   |  |                            |              |                                   |
|----|--|--|----------------------------|--------------|-----------------------------------|
| 1. | Fill in your employment information  |  | Debtor 1                   |              | Debtor 2 or non-filing spouse     |
|    | If you have more than one job, attach a separate page with information about additional employers. | Employment status  | X Employed Not employed    |              | Employed  Not employed            |
|    | Include part-time, seasonal, or self-employed work.  | Occupation   | Accountant                 |              |                                   |
|    | Occupation may Include student or homemaker, if it applies.  | Employers name   | Jade Carpentry             |              |                                   |
|    |  | Employers address  | 143 Bernice                |              |                                   |
|    |  |  | Bensenville, IL 60         | 106          | 1                                 |
|    |  | How long employed there?   | Since 11/1/2002            |              |                                   |
| Pa | rt 2: Give Details About Month   | ly Income  |                            |              |                                   |
|    | spouse unless you are separated.   | ve more than one employer, comb  | oine the information for a |              | , ,                               |
|    |  |  |                            | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. |  | ry and commissions (before all pa<br>calculate what the monthly wage w | -                          | \$5,130.67   | \$0.00                            |
| 3. | Estimate and list monthly overti   | me pay.  |                            | \$0.00       | \$0.00                            |
| 4. | Calculate gross income. Add line   | e 2 + line 3.  |                            | \$5,130.67   | \$0.00                            |

 Official Form 106I
 Record # 756181
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 Dorothy Ann Document Syers Page 30 of 60 Case Number (if known) Last Name

|               |                                 |   |              | For Debtor 1             |        | or Debtor 2 or<br>on-filing spouse |                       |
|---------------|---------------------------------|---|--------------|--------------------------|--------|------------------------------------|-----------------------|
| C             | Сору                            | line 4 here   | 4.           | \$5,130.67               |        | \$0.00                             |                       |
|               |                                 | payroll deductions:   |              |                          |        |                                    |                       |
|               |                                 | ax, Medicare, and Social Security deductions  | 5a.<br>      | \$910.52                 | _      | \$0.00                             |                       |
| 5             | b. <b>N</b>                     | landatory contributions for retirement plans  | 5b.<br>—     | \$0.00                   |        | \$0.00                             |                       |
| 5             | ic. <b>V</b>                    | oluntary contributions for retirement plans   | 5c.<br>_     | \$0.00                   | _      | \$0.00                             |                       |
| 5             | d. R                            | equired repayments of retirement fund loans   | 5d.<br>_     | \$233.87                 | _      | \$0.00                             |                       |
|               |                                 | surance   | 5e.<br>_     | \$0.00                   |        | \$0.00                             |                       |
| 5             | f. D                            | omestic support obligations   | 5f.<br>      | \$0.00                   |        | \$0.00                             |                       |
| 5             | ig. <b>U</b>                    | nion dues   | 5g.<br>_     | \$0.00                   |        | \$0.00                             |                       |
|               |                                 | ther deductions. Specify:   | 5h.<br>_     | \$0.00                   | _      | \$0.00                             |                       |
| 6. Add        | the                             | <b>payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.<br>       | \$1,144.39               | _      | \$0.00                             |                       |
| 7. Calo       | culat                           | e total monthly take-home pay. Subtract line 6 from line 4.   | 7.           | \$3,986.28               |        | \$0.00                             |                       |
| 8. List       | all c                           | other income regularly received:  |              | _                        |        | _                                  |                       |
| 8             | Ba.                             | Net income from rental property and from operating a business,  |              |                          |        |                                    |                       |
|               |                                 | profession, or farm   |              |                          |        |                                    |                       |
|               |                                 | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |              |                          |        |                                    |                       |
|               |                                 | monthly net income.   | 8a.          | \$0.00                   |        | \$0.00                             |                       |
| 8             | ßb.                             | Interest and dividends  | 8b.          | \$0.00                   |        | \$0.00                             |                       |
| 8             | Bc.                             | Family support payments that you, a non-filing spouse, or a   | 8c.          | \$ 0.00                  |        | \$ 0.00                            |                       |
|               |                                 | dependent regularly receive   |              |                          |        |                                    |                       |
|               |                                 | Include alimony, spousal support, child support, maintenance, divorce   |              |                          |        |                                    |                       |
|               |                                 | settlement, and property settlement.  |              |                          |        |                                    |                       |
| 8             | ld.                             | Unemployment compensation   | 8d.          | \$0.00                   |        | \$0.00                             |                       |
| 8             | le.                             | Social Security   | 8e.          | \$0.00                   |        | \$0.00                             |                       |
| 8             | ßf.                             | Other government assistance that you regularly receive  | 8f.          | \$0.00                   |        | \$0.00                             |                       |
|               |                                 | Include cash assistance and the value (if known) of any non-cash  |              |                          |        |                                    |                       |
|               |                                 | assistance that you receive, such as food stamps (benefits under the  |              |                          |        |                                    |                       |
|               |                                 | Supplemental Nutrition Assistance Program) or housing subsidies.  |              |                          |        |                                    |                       |
|               |                                 | Specify:  |              |                          |        |                                    |                       |
| 8             | ß.                              | Pension or retirement income  | 8g.<br>      | \$0.00                   |        | \$0.00                             |                       |
| 8             | ßh.                             | Other monthly income. Specify:  | 8h.          | \$0.00                   |        | \$0.00                             |                       |
| 9.            | \dd a                           | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9            | \$0.00                   | _      | \$0.00                             |                       |
| 10. <b>C</b>  | Calci                           | ulate monthly income. Add line 7 + line 9.  | 10.          | \$3,986.28               |        | \$0.00                             | \$3,986.28            |
| A             | Add t                           | he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | L            | φ3,900.20                | L      | <b>\$0.00</b>                      | \$3,966.26            |
| ]<br>[]<br>[] | nclud<br>other<br>Do no<br>Spec | all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives.  It include any amounts already included in lines 2-10 or amounts that are notify: | our dependen | o pay expenses listed in |        |                                    | 11\$0.00              |
|               |                                 | the amount in the last column of line 10 to the amount in line 11. The res<br>that amount on the Summary of Schedules and Statistical Summary of Ce   |              | •                        | applie | es                                 | 12. <b>\$3,986.28</b> |
|               |                                 | ou expect an increase or decrease within the year after you file this form  |              |                          | ۰ اسا  |                                    | , 1,733120            |
|               | χN                              |   |              |                          |        |                                    |                       |

| Fill in this in                 | formation to identify yo                       | ur case:                      |                               |   |                    |                               |
|---------------------------------|--|-------------------------------|-------------------------------|---|--------------------|-------------------------------|
| Debtor 1                        | Dorothy<br>First Name                          | Ann<br>Middle Name            | Syers<br>Last Name            | Check if this is:   | d filing           |                               |
| Debtor 2<br>(Spouse, if filing) | First Name                                     | Middle Name                   | Last Name                     | _ ·   |                    | -petition chapter 13          |
| United States                   | Bankruptcy Court for the :                     | NORTHERN DISTRICT             | OF ILLINOIS                   | income as o   | of the following d | ate:                          |
| Case Number                     |  | -                             |                               | MM / DD / Y   | YYYY               |                               |
| (If known)                      |  |                               |                               | — A senarate  | filing for Debtor  | 2 because Debtor 2            |
| Official F                      | <u>orm 106J</u>                                |                               |                               |   | separate house     |                               |
| Schedul                         | e J: Your Exp                                  | oenses                        |                               |   |                    | 12/14                         |
| more space is i                 | needed, attach another s                       |                               |                               | are equally responsible for supplyir<br>ges, write your name and case num   | =                  |                               |
|                                 | Describe Your Household                        |                               |                               |   |                    |                               |
| 1. Is this a joi                | nt case?<br>So to line 2.                      |                               |                               |   |                    |                               |
|                                 | Does Debtor 2 live in a s                      | eparate household?            |                               |   |                    |                               |
|                                 | No. Yes. Debtor 2 must                         | file a separate Sched         | ule J.                        |   |                    |                               |
| 2. Do you h                     | nave dependents?                               | No                            |                               | Dependent's relationship to<br>Debtor 1 or Debtor 2                         | Dependent's age    | Does dependent live with you? |
| Do not lis<br>Debtor 2          | st Debtor 1 and                                |                               | ut this information for ndent | Son   | 29                 | No                            |
| Do not si                       | tate the dependents'                           |                               |                               |   |                    | X Yes                         |
| names.                          |  |                               |                               |   |                    | X No<br>Yes                   |
|                                 |  |                               |                               |   |                    | X No                          |
|                                 |  |                               |                               |   |                    | Yes                           |
|                                 |  |                               |                               |   |                    | x No                          |
|                                 |  |                               |                               |   |                    | Yes                           |
|                                 |  |                               |                               |   |                    | X No                          |
|                                 |  |                               |                               |   |                    | Yes                           |
|                                 | expenses include s of people other than        | X No                          |                               |   |                    |                               |
|                                 | and your dependents?                           | Yes                           |                               |   |                    |                               |
| Part 2:                         | stimate Your Ongoing Mo                        | nthly Expenses                |                               |   |                    |                               |
| _                               | f a date after the bankru                      |                               |                               | n as a supplement in a Chapter 13 c<br>check the box at the top of the forn | =                  |                               |
|                                 | =  | =                             | tance if you know the value   |   | v                  | our expenses                  |
| or such assist                  | ance and have included                         | it on <i>Scriedule I: You</i> | r Income (Official Form 106I  | .)  |                    | our expenses                  |
|                                 | tal or home ownership enter the ground or lot. | xpenses for your resi         | dence. Include first mortgage | e payments and  | 4.                 | \$1,456.00                    |
|                                 | cluded in line 4:                              |                               |                               |   | ٠                  | <b>V</b> 1, 100.00            |
| 4a. Re                          | al estate taxes                                |                               |                               |   | <b>4</b> a.        | \$0.00                        |
|                                 | operty, homeowner's, or r                      | enter's insurance             |                               |   | 4b.                | \$106.00                      |
|                                 | me maintenance, repair,                        |                               |                               |   | 4c.                | \$50.00                       |
| 4d. Ho                          | meowner's association o                        | r condominium dues            |                               |   | 4d.                | \$0.00                        |
|                                 |  |                               |                               |   |                    |                               |

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Last Name

Dorothy Ann Middle Name

Debtor 1

First Name

Case Number (if known) \_\_

Your expenses 5 \$177.00 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$245.00 6a. 6a. Electricity, heat, natural gas \$95.00 6b. Water, sewer, garbage collection \$190.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$575.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$85.00 9. Clothing, laundry, and dry cleaning 10. \$40.00 Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$340.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$75.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 756181 Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main Document Page 33 of 60

| Debtor | 1 Doro   | thy Ann                                    | Syers                                  | Case Number (if known) |               |            |
|--------|----------|--|--|------------------------|---------------|------------|
|        | First Na | ame Middle Name                            | Last Name                              |                        |               |            |
| 21.    | Other. S | Specify:                                   |  | _                      | 21.           | \$0.00     |
| 22     | Your mo  | onthly expense: Add lines 4 through 21     |  |                        | 22.           | \$3,484.00 |
|        | The resu | Ilt is your monthly expenses.              |  |                        |               |            |
|        |          |  |  |                        |               |            |
| 23.    | Calculat | e your monthly net income.                 |  |                        |               |            |
|        | 23a.     | Copy line 12 (your comibined monthly       | y income) from Schedule I.             |                        | 23a           | \$3,986.28 |
|        | 23b.     | Copy your monthly expenses from lin        | e 22 above.                            |                        | 23b. <b>-</b> | \$3,484.00 |
|        | 23c.     | Subtract your monthly expenses from        | -                                      |                        | 23c.          | \$502.28   |
|        |          | The result is your monthly net income      | 9.                                     |                        |               |            |
|        |          |  |  |                        |               |            |
|        |          |  |  |                        |               |            |
|        |          |  |  |                        |               |            |
| 24.    | Do you   | expect an increase or decrease in your     | expenses within the year after you     | file this form?        |               |            |
|        | For exar | nple, do you expect to finish paying for y | our car loan within the year or do you | ı expect your          |               |            |
|        | mortgag  | e payment to increase or decrease beca     | use of a modification to the terms of  | your mortgage?         |               |            |
|        | X No     |  |  |                        |               |            |
|        | Yes      | s. Explain Here:                           |  |                        |               |            |
|        |          |  |  |                        |               |            |
|        |          |  |  |                        |               |            |
|        |          |  |  |                        |               |            |
|        |          |  |  |                        |               |            |

 Official Form 106J
 Record #
 756181
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this information to identify your case: |                        |                                   |                      |
|---|------------------------|-----------------------------------|----------------------|
| Debtor 1  | Dorothy                | Ann                               | Syers                |
|   | First Name             | Middle Name                       | Last Name            |
| Debtor 2  |                        |                                   |                      |
| (Spouse, if filing)                             | First Name             | Middle Name                       | Last Name            |
| United States                                   | Bankruptcy Court for t | the : <u>NORTHERN</u> District of | ILLINOIS_<br>(State) |
| Case Number<br>(If known)                       | ·                      |                                   |                      |

### Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NC     | an attorney to help you fill out bankruptcy forms?  |
| No  |   |
| Yes. Name of Person                               | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
| Under penalty of perium I dealers that I have re- | d the cummany and cohodules filed with this deplayation and that they are true and            |
| correct.  | d the summary and schedules filed with this declaration and that they are true and            |
| ✗ /s/ Dorothy Ann Syers                           | <b>x</b>  |
| Signature of Debtor 1                             | Signature of Debtor 2   |
| Date 12/05/2017                                   | Date  |
| MM / DD / YYYY                                    | MM / DD / YYYY  |
|   |   |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| number (if known). Answer every question.  |                             | p of any additional pages, write your name and case |                               |  |
|--|-----------------------------|---|-------------------------------|--|
| Part 1: Give Details About Your Marital Status and Wh  | ere You Lived Before        |   |                               |  |
| 01. What is your current marital status?   |                             |   |                               |  |
| Married  |                             |   |                               |  |
| Not married  |                             |   |                               |  |
| 02 During the last 3 years, have you lived anywhere oth  | er than where you live nov  | w?  |                               |  |
| ■ No.  Yes. List all of the places you lived in the last 3 yea   | ro. Do not include where w  | nu live pour  |                               |  |
| Tes. List all of the places you lived in the last 3 year   | rs. Do not include where yo | ou live now.  |                               |  |
| Debtor 1   | Dates Debtor 1              | Debtor 2:   | Dates Debtor 2<br>lived there |  |
| Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) |                             |   |                               |  |
| ■ No.  |                             |   |                               |  |
| Yes. Make sure you fill out Schedule H: Your Code  | DTORS (Official Form 106H). |   |                               |  |
|  |                             |   |                               |  |
| Explain the Sources of Your Income   |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |
|  |                             |   |                               |  |

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Debtor 1 Dorothy Ann Syers Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$58,029 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$64,539 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$57,806 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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| 06 Ar | First Name                         | Middle Name  | Last Name           |                              |                           |                            |
|-------|------------------------------------|--|---------------------|------------------------------|---------------------------|----------------------------|
| 06 Aı | a aithar Dahtar 1's ar F           |  |                     |                              |                           |                            |
|       | e either Debtor 13 of L            | Debtor 2's debts primarily cor                                       | sumer debts?        |                              |                           |                            |
|       | _                                  |  |                     |                              |                           |                            |
|       | _                                  | nor Debtor 2 has primarily co  |                     |                              | ned in 11 U.S.C. § 101(8) | as                         |
|       | •                                  | ndividual primarily for a persona<br>ys before you filed for bankrup |                     |                              | 225* or more?             |                            |
|       | During the 90 day                  | ys belore you filed for barrkrup                                     | icy, did you pay ai | iy creditor a total or \$0,2 | 223 Of More:              |                            |
|       | ☐ No. Go to line                   | e 7.   |                     |                              |                           |                            |
|       |                                    |  |                     |                              |                           |                            |
|       | _                                  | ow each creditor to whom you   | •                   |                              | · •                       |                            |
|       |                                    | you paid that creditor. Do not                                       |                     | • •                          | •                         |                            |
|       |                                    | and alimony. Also, do not incl<br>nt on 4/01/16 and every 3 year     |                     | -                            | • •                       |                            |
|       | ,                                  |  |                     |                              |                           |                            |
|       | Yes. Debtor 1 or Deb               | otor 2 or both have primarily  | consumer debts.     |                              |                           |                            |
|       | During the 90 da                   | ays before you filed for bankru                                      | ptcy, did you pay a | any creditor a total of \$6  | 00 or more?               |                            |
|       | ☐ No. Go to line                   | e 7.   |                     |                              |                           |                            |
|       | <b>-</b>                           |  |                     |                              |                           |                            |
|       | <del></del>                        | ow each creditor to whom you<br>not include payments for dome        | -                   |                              |                           |                            |
|       |                                    | o, do not include payments to a                                      | • • •               | •                            | port and                  |                            |
|       | a                                  | s, as not molado paymonto to t                                       | an automoy for time | bannapie, case.              |                           |                            |
|       |                                    |  | Dates of            | Total amount paid            | Amount you still          | owe Was this payment for   |
|       |                                    |  | payments            | Total amount pala            | Amount you still          | vius uns payment ion       |
|       |                                    |  |                     |                              |                           |                            |
|       | BK OF A                            | MER 4909 Savarese Cir  | Monthly             | \$ 4,473                     | \$ 156,702                | Mortgage                   |
|       | Tampa F                            | L 33634  |                     |                              |                           | Car                        |
|       |                                    |  |                     |                              |                           | Credit card                |
|       |                                    |  |                     |                              |                           | Loan repayment             |
|       |                                    |  |                     |                              |                           | Suppliers or vendors Other |
|       |                                    |  |                     |                              |                           |                            |
|       |                                    |  |                     |                              |                           |                            |
|       |                                    |  |                     |                              |                           |                            |
| 07 W  | ithin 1 year before you f          | iled for bankruptcy, did you ma                                      | ike a payment on a  | a debt you owed anyone       | e who was an insider?     |                            |
|       |                                    | ives; any general partners; rela<br>are an officer, director, person |                     |                              |                           |                            |
|       |                                    | business you operate as a sol  |                     |                              | •                         | , , ,                      |
| su    | ch as child support and            | alimony.   |                     |                              |                           |                            |
| _     | No.                                |  |                     |                              |                           |                            |
|       | Yes. List all payments             | to an insider.   |                     |                              |                           |                            |
|       |                                    |  | Dates of payment    | Total amount paid            | Amount you still owe      | Reason for this payment    |
|       |                                    |  | paymon              | P                            |                           |                            |
|       |                                    | iled for bankruptcy, did you ma                                      | ike any payments    | or transfer any property     | on account of a debt that | benefited                  |
|       | insider?<br>clude payments on debt | s guaranteed or cosigned by a  | n insider.          |                              |                           |                            |
|       | No.                                |  |                     |                              |                           |                            |
| _     | Yes. List all payments             | to an insider.   |                     |                              |                           |                            |
| _     |                                    |  | Dates of            | Total amount                 | Amount you still          | Reason for this payment    |
|       |                                    |  | payment             | paid                         | owe                       | Include creditor's name    |
| Part  | 4 Identify Legal act               | ions, Repossessions, and Fore  | closures            |                              |                           |                            |
|       |                                    |  |                     |                              |                           |                            |
|       |                                    |  |                     |                              |                           |                            |
|       |                                    |  |                     |                              |                           |                            |

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Dorothy Ann Syers Case Number (if known) Debtor 1 First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Nature of the case Court or agency Status of the case 10 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below. 11 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No. Yes. **List Certain Gifts and Contributions** 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No. Yes. Fill in the details for each gift. 14 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift. List Certain Losses Part 6: 15 Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No. Yes. Fill in the details for each gift. Part 7 **List Certain Payments or Transfers** Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Geraci Law L.L.C. Payment/Value: \$4,000.00: \$700.00 55 E. Monroe Street #3400 paid prior to filing. balance to be paid Chicago, IL 60603 through the plan.

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 Debtor 1
 Dorothy
 Ann
 Syers
 Case Number (if known)

 First Name
 Middle Name
 Last Name

|    | Party Contact Info  | Description and value of  | any property transferred   | Date paym or transfer   |   |
|----|---|---|--|---|---|
|    | Hananwill Credit Counseling   | Credit Counseling Services  | S  | 2017  | \$25.00   |
|    | 115 N. Cross St.  | _   |  |   |   |
|    | Robinson, IL 62454  | _   |  |   |   |
|    |   | _   |  |   |   |
|    |   |   |  |   |   |
|    |   |   |  |   |   |
|    |   |   |  |   |   |
| 17 | Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that  | rs or to make payments to your cre  |  | fer any property to any   | one who   |
|    | No.   |   |  |   |   |
|    | Yes. Fill in the details.   |   |  |   |   |
| 18 | Within 2 years before you filed for bankrupt transferred in the ordinary course of your bloclude both outright transfers and transfers  | usiness or financial affairs?   |  |   |   |
|    | Do not include gifts and transfers that you h   | nave already listed on this statemer  | nt.  |   |   |
|    | No.   |   |  |   |   |
|    | Yes. Fill in the details for each gift.   |   |  |   |   |
| 19 | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-p   |   | to a self-settled trust or s   | imilar device of which y  | ou are a  |
|    | No.   |   |  |   |   |
|    | Yes. Fill in the details for each gift.   |   |  |   |   |
|    |   |   |  |   |   |
| P  | art 8: List Certain Financial Accounts, Instr   | uments, Safe Deposit Boxes, and Sto   | rage Units   |   |   |
| 20 | Within 1 year before you filed for bankrupto<br>sold, moved, or transferred?<br>Include checking, savings, money market, o<br>houses, pension funds, cooperatives, assoc            | or other financial accounts; certifica  | ates of deposit; shares in   | · ·   |   |
|    | No.   |   |  |   |   |
|    |   |   |  |   |   |
|    | Yes. Fill in the details.   |   |  |   |   |
|    | Yes. Fill in the details.   | Last 4 digits of account number   | Type of account or instrument  | Date account was closed, sold, moved, or transferred                                | Last balance before closing or transfer                             |
|    | Yes. Fill in the details.   | Last 4 digits of account number   | • •  | closed, sold, moved,  |   |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables?   |   | instrument   | closed, sold, moved, or transferred   | closing or transfer   |
| 21 | Do you now have, or did you have within 1 y   |   | instrument   | closed, sold, moved, or transferred   | closing or transfer   |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables?   | year before you filed for bankruptcy  | instrument   | closed, sold, moved, or transferred   | closing or transfer   |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables?   |   | instrument   | closed, sold, moved,<br>or transferred<br>r other depository for s                  | closing or transfer   |
|    | Do you now have, or did you have within 1 y cash, or other valuables?   | year before you filed for bankruptcy Who else had access to it?   | instrument  y, any safe deposit box o  Describe the content  | closed, sold, moved,<br>or transferred  r other depository for s                    | closing or transfer ecurities,  Do you still                        |
|    | Do you now have, or did you have within 1 y cash, or other valuables?  No.  Yes. Fill in the details.   | year before you filed for bankruptcy Who else had access to it?   | instrument  y, any safe deposit box o  Describe the content  | closed, sold, moved,<br>or transferred  r other depository for s                    | closing or transfer ecurities,  Do you still                        |
|    | Do you now have, or did you have within 1 you cash, or other valuables?  No. Yes. Fill in the details.  Have you stored property in a storage unit of                               | year before you filed for bankruptcy Who else had access to it?   | instrument  y, any safe deposit box o  Describe the content  | closed, sold, moved,<br>or transferred  r other depository for s                    | closing or transfer ecurities,  Do you still                        |
|    | Do you now have, or did you have within 1 you cash, or other valuables?  No.  Yes. Fill in the details.  Have you stored property in a storage unit of No.                          | year before you filed for bankruptcy Who else had access to it?   | instrument  y, any safe deposit box o  Describe the content  | closed, sold, moved, or transferred  r other depository for s  nts  for bankruptcy? | closing or transfer ecurities,  Do you still have it?  Do you still |
| 22 | Do you now have, or did you have within 1 you cash, or other valuables?  No. Yes. Fill in the details.  Have you stored property in a storage unit of No. Yes. Fill in the details. | year before you filed for bankruptcy Who else had access to it?  or place other than your home within Who else has or had access to it? | pescribe the content of the policy of the content of the policy of the content of the policy of the content of the policy of the content of the policy of th | closed, sold, moved, or transferred  r other depository for s  nts  for bankruptcy? | closing or transfer ecurities,  Do you still have it?               |
| 22 | Do you now have, or did you have within 1 you cash, or other valuables?  No.  Yes. Fill in the details.  Have you stored property in a storage unit of No.                          | year before you filed for bankruptcy Who else had access to it?  or place other than your home within Who else has or had access to it? | pescribe the content of the policy of the content of the policy of the content of the policy of the content of the policy of the content of the policy of th | closed, sold, moved, or transferred  r other depository for s  nts  for bankruptcy? | closing or transfer ecurities,  Do you still have it?  Do you still |
| 22 | Do you now have, or did you have within 1 you cash, or other valuables?  No. Yes. Fill in the details.  Have you stored property in a storage unit of No. Yes. Fill in the details. | year before you filed for bankruptcy Who else had access to it?  or place other than your home within Who else has or had access to it? | pescribe the content of the policy of the content of the policy of the content of the policy of the content of the policy of the content of the policy of th | closed, sold, moved, or transferred  r other depository for s  nts  for bankruptcy? | closing or transfer ecurities,  Do you still have it?  Do you still |
| 22 | Do you now have, or did you have within 1 you cash, or other valuables?  No. Yes. Fill in the details.  Have you stored property in a storage unit of No. Yes. Fill in the details. | year before you filed for bankruptcy Who else had access to it?  or place other than your home within Who else has or had access to it? | pescribe the content of the policy of the content of the policy of the content of the policy of the content of the policy of the content of the policy of th | closed, sold, moved, or transferred  r other depository for s  nts  for bankruptcy? | closing or transfer ecurities,  Do you still have it?  Do you still |

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| Debtor 1    | Dorothy  | Ann  | Syers                             | Case Number (if known)   |                    |
|-------------|--|--|-----------------------------------|--|--------------------|
|             | First Name   | Middle Name  | Last Name                         |  |                    |
|             | o you hold or control ar                               | ny property that someone                                     | e else owns? Include any prope    | erty you borrowed from, are storing for, or h  | old in trust       |
|             | No.  |  |                                   |  |                    |
| Ē           | Yes. Fill in the details.                              |  |                                   |  |                    |
| _           |  | When   | e is the property?                | Describe the property  | Value              |
|             | China Badaille Aban                                    | ıt Environmental Informatio                                  |                                   |  |                    |
| Part        | Give Details Abou                                      | it Environmental information                                 | on                                |  |                    |
| For th      | e purpose of Part 10, th                               | e following definitions a                                    | oply:                             |  |                    |
| ha          | zardous or toxic substa                                | ances, wastes, or materia                                    |                                   | rning pollution, contamination, releases of<br>e water, groundwater, or other medium,<br>astes, or material. |                    |
|             |  | facility, or property as de<br>, or utilize it, including di |                                   | law, whether you now own, operate, or utilize  | ce                 |
|             |  | s anything an environme<br>terial, pollutant, contami        |                                   | s waste, hazardous substance, toxic  |                    |
| Repor       | rt all notices, releases, a                            | and proceedings that you                                     | know about, regardless of wh      | en they occurred.  |                    |
| 24 H        | _  | nit notified you that you r                                  | nay be liable or potentially liab | le under or in violation of an environmental   | aw?                |
|             | No. Yes. Fill in the details.                          |  |                                   |  |                    |
| _           | <b>_</b>   | Gove   | rnmental unit                     | Environmental law, if you know it  | Date of notice     |
| 25 <b>H</b> | ave you notified any go                                | vernmental unit of any re                                    | elease of hazardous material?     |  |                    |
|             | No. Yes. Fill in the details.                          |  |                                   |  |                    |
| _           | _  | Gove   | rnmental unit                     | Environmental law, if you know it  | Date of notice     |
| 26 <b>H</b> | ave you been a party in                                | any judicial or administr                                    | ative proceeding under any en     | vironmental law? Include settlements and o   | rders.             |
|             | No. Yes. Fill in the details.                          |  |                                   |  |                    |
| _           | _  |  | t or agency                       | Nature of the case   | Status of the case |
| Part        | Give Details Abou                                      | it Your Business or Connec                                   | tions to Any Business             |  |                    |
| 27 W        | /ithin 4 years before you                              | u filed for bankruptcy, did                                  | d you own a business or have a    | any of the following connections to any busi   | ness?              |
|             | _  |  | le, profession, or other activity | -  |                    |
|             | A member of a lim                                      | nited liability company (L                                   | LC) or limited liability partners | hip (LLP)  |                    |
|             | ∐A partner in a part                                   |  | -f                                |  |                    |
|             | <u> </u>   | r, or managing executive                                     |                                   |  |                    |
|             | ∐An owner of at lea                                    | st 5% of the voting or eq                                    | uity securities of a corporation  | 1  |                    |
|             | No. None of the above                                  | e applies. Go to Part 12.                                    |                                   |  |                    |
|             | Yes. Check all that ap                                 | ply above and fill in the de                                 | tails below for each business.    |  |                    |
|             | /ithin 2 years before you<br>stitutions, creditors, or |  | d you give a financial statemen   | t to anyone about your business? Include al  | l financial        |
|             | No.  |  |                                   |  |                    |
|             | Yes. Fill in the details.                              |  |                                   |  |                    |
|             |  | Date is  | ssued                             |  |                    |
|             |  |  |                                   |  |                    |
|             |  |  |                                   |  |                    |
|             |  |  |                                   |  |                    |
|             |  |  |                                   |  |                    |

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 Debtor 1
 Dorothy
 Ann
 Syers
 Case Number (*if known*)

 First Name
 Middle Name
 Last Name

| Cigii Below   |   |
|---|---|
| answers are true and correct. I understand that m                   | ancial Affairs and any attachments, and I declare under penalty of perjury that the naking a false statement, concealing property, or obtaining money or property by fraud in fines up to \$250,000, or imprisonment for up to 20 years, or both. |
| ✗ /s/ Dorothy Ann Syers   | *   |
| Signature of Debtor 1   | Signature of Debtor 2   |
| Date 12/05/2017<br>MM / DD / YYYY                                   | Date  |
| Did you attach additional pages to <i>Your Statement</i> ■ No □ Yes | nt of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |
| Did you pay or agree to pay someone who is not                      | an attorney to help you fill out bankruptcy forms?  |
| No  |   |
| Yes. Name of person   | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).  |
|   |   |

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B2030 (Form 2030) (12/15)

## United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In  | re                      |   |                                      |               |                             |
|-----|-------------------------|---|--------------------------------------|---------------|-----------------------------|
| Doı | rothy Ann S             | Syers / Debtor  |                                      | Case No:      |                             |
|     |                         |   |                                      | Chapter:      | Chapter 13                  |
|     |                         | DISCLOSURE OF COM   | IPENSATION OF ATTORNEY               | FOR DEB       | TOR                         |
|     | npensation j            | to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contem. | e petition in bankruptcy, or agree   | ed to be paid | l to me, for services       |
|     | For legal               | services, I have agreed to accept   | \$4,000.00                           |               |                             |
|     | Prior to the            | he filing of this statement I have received   | \$700.00                             |               |                             |
|     | Balance I               | Due   | \$3,300.00                           |               |                             |
| 2.  |                         | e of the compensation paid to me was:   |                                      |               |                             |
| _   |                         | otor(s) Other: (specify)  |                                      |               |                             |
| 3.  | The sourc               | e of compensation to be paid to me is:  |                                      |               |                             |
|     | De                      | Other: (specify)  |                                      |               |                             |
| 4.  |                         | re not agreed to share the above-disclosed compety law firm.  | ensation with any other person un    | less they are | e members and associates    |
|     |                         | re agreed to share the above-disclosed compensa<br>y law firm. A copy of the agreement, together w<br>hed.  |                                      |               |                             |
| 5.  | In return f case, inclu | for the above-disclosed fee, I have agreed to rendering:  | ler legal service for all aspects of | the bankrup   | otcy                        |
|     |                         | ysis of the debtor's financial situation, and rende   | ering advice to the debtor in deter  | mining whe    | ether to file a petition in |
|     |                         | ruptcy;   | omanta of office and plan which      | mar ha ragi   | simad.                      |
|     | _                       | aration and filing of any petition, schedules, state<br>esentation of the debtor at the meeting of creditor   | -                                    | -             |                             |
|     | c. Kepi                 | eschation of the debtor at the meeting of creditor  | is and commination hearing, and      | any adjoun    | ied hearings thereor,       |
| 6.  | By agreen               | nent with the debtor(s), the above-disclosed fee  | does not include the following ser   | rvice:        |                             |
|     |                         |   |                                      |               |                             |
|     |                         | CI  | ERTIFICATION                         |               |                             |
|     |                         | I certify that the foregoing is a complete s payment to me for representation of the debto  | 2 0                                  | ~             | OT .                        |
|     |                         | Date: 12/15/2017  | s/ Wylie W Mok                       |               |                             |
|     |                         | -   | Signature of Attorney                | _             |                             |
|     |                         |   | Geraci Law I. I. C                   |               |                             |

Page 1 of 1 Record # 756181

Name of law firm

#### Case 17-37228 Doc 1 Filed Ge/aci/Law Entered 12/15/17 16:33:30

National Headquarters: 55 E. Monroe இரைய #3 கூரு Chica இ அழு இ அரு - 866-925-1313 help@geracilaw.com



Date: 11/28/2017

Consultation Attorney: MOK

Record #: 756-181

#### Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating

| retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.   |
|--|
| <b>No other work</b> : Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility.  Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.  |
| PLAN: The plan payment is estimated to be \$   |
| My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other:  My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other  Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly  Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge.  Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some of all of the |
| I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened.  X  Dorothy Syers (Debtor)  X  Attorney for the Debtor(s)  Representing Geraci Law L.L.C.  |

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CHAPTER 13 PLAN ACKNOWLEDGMENT

| I,   |
|--|
| The total amount to be paid to the Trustee is \$\frac{1}{2}\text{cov}\$. I will pay \$\frac{500}{200}\$ per month for at least \$\frac{9}{200}\$ months. This amount may change depending on the claims filed, and the total amount I am required to pay will increase i am required to turn over some or all of my tax refunds. |
| Any scheduled increases are as follows:  |
| This includes:   |
| 1. These vehicles: Db Toyota Campy   |
| 2. These other secured debts:  |
| 3. Tax debt of \$ Support debt of \$ Mortgage arrears of \$  |
| 4. Other:  |
| DAS I pay all mortgage payments directly every month. OR   |
| My mortgage payments are included in my plan payment.  |
| Plan payments start with my first paycheck after filing. If the payment is not deducted from my check, must set it aside and send it to the Trustee.   |
| All of my debts are being paid in my Chapter 13 except the following that I am paying direct:  |
| The following vehicle(s):  |
| My student loans PAYING IN DEFERMENT   |
| Other:   |
| OTHER TERMS  |
| I understand that my attorneys' fees will be paid in full before my other creditors and if I fail to make my payments and my case is dismissed or converted before those fees are paid, any secured creditors will not have been paid as much as they may have otherwise been paid.  |
| I must pay the Trustee any non-exempt proceeds I receive from any cause of action.   |
| I will notify my attorneys if I am injured, have the right to sue anyone for any reason, win the lottery, receive an inheritance, or otherwise become entitled to receive any sum of money during my bankruptcy.   |
| I must be signed up for client corner and texting so my attorneys can communicate with me.   |
| I will notify my attorneys if I move, change my phone number or change or lose my job.   |
| I must provide my attorneys copies of my tax and my  |
| out  |
| Other:   |
|  |
|  |
| x stonety Lyn x 12/5/17  |
| Date:  |
| For Geraci Law: $x$ Date: $\frac{12/5}{7}$ Date: $\frac{(0.5)}{7}$   |
| Record #: 756 - 71   |

### UNITED STATESTANKRUPFCYCOURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Mair 3. Personally review with the debtor **Endoction** the completed perition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Mail 2. Inform the debtor that the debtor next the debtor next the debtor next the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.



CARA Page 3 of 6

# Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Main C. TERMINATION OR CONVERSION OF THE PEASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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- Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Mair (d) Any portion of the retainer that control and the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



#### Case 17-37228 Doc 1 Filed 12/15/17 Entered 12/15/17 16:33:30 Desc Mair F. ALLOWANCE AND PAYMENT OF ATTORNOWY SOME SAND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00

| 3. Before signing this agreement, the attorney ha | s received | 700      |     |              |
|---|------------|----------|-----|--------------|
| toward the flat fee, leaving a balance due of \$  | 3,300      | ; and \$ | 310 | for expenses |
| leaving a balance due for the filing fee of \$    | 0          | _        |     |              |

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 11,28,17

Signed:

Debtor(s)

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Dorothy Ann Syers / Debtor | Bankruptcy Docket #: |
|----------------------------|----------------------|
|                            | Judge:               |

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 12/05/2017 /s/ Dorothy Ann Syers

**Dorothy Ann Syers** 

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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B 201A (Form 201A) (11/11)

#### UNITED STATES BANKRUPTCY COURT

#### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Dorothy Ann Syers /

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 12/05/2017 | /s/ Dorothy Ann Syers |  |
|-------------------|-----------------------|--|
|                   | Dorothy Ann Syers     |  |
| Dated: 12/15/2017 | /s/ Wylie W Mok       |  |
|                   | Attorney: Wylie W Mok |  |

Is/ Dorothy Ann Syare

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| Debtor 1                    | Dorothy   | Ann  | Syers   | Case Number (if  | known)  |
|-----------------------------|---|--|---|--|---|
|                             | First Name  | Middle Name  | Last Name   | ·  |   |
| Part 6:                     | Answer These Question   | s for Reporting Purposes   |   |  |   |
|                             | hat kind of debts do<br>ou have?  | as "incurred by an incurred by an in | individual primarily for a per<br>16b.<br>e 17.<br>primarily business deb<br>ess or investment or throug<br>16c.<br>e 17. | bts? Consumer debts are defersonal, family, or household parsonal, family, or household parsonal, family, or household parsonal, family, or household parsonal, family, or household parsonal family, or household parso | ourpose." s that you incurred to obtain   |
| 17. <b>A</b> r              | e you filing under  | No. Lam not filing   | under Chapter 7. Go to li   | no 19  |   |
| Do<br>an<br>ex<br>ad<br>are | papter 7?  you estimate that after y exempt property is cluded and iministrative expenses paid that funds will be ailable for distribution unsecured creditors? | Yes. I am filing und   | der Chapter 7. Do you est   | imate that after any exempt pr<br>unds will be available to distrib  | roperty is excluded and oute to unsecured creditors?  |
| yo                          | ow many creditors do<br>u estimate that you<br>ve?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | □ 1,000<br>□ 5,001<br>□ 10,00   |  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000  |
| es                          | ow much do you<br>timate your assets to<br>worth?   | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million  | □ \$10,0<br>□ \$50,0  | 0,001-\$10 million<br>00,001-\$50 million<br>00,001-\$100 million<br>000,001-\$500 million   | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion     |
| es                          | ow much do you<br>timate your liabilities<br>be?  | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million  | \$10,0<br>\$50,0  | 0,001-\$10 million<br>00,001-\$50 million<br>00,001-\$100 million<br>000,001-\$500 million   | ☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion |
| Part 7:                     | Sign Below  |  |   |  |   |
| For you                     |   | correct.  If I have chosen to file un  | der Chapter 7, I am aware   | enalty of perjury that the information of the infor | , under Chapter 7, 11,12, or 13   |
|                             |   | this document, I have obt  | tained and read the notice  | ree to pay someone who is no required by 11 U.S.C. § 342(be 11, United States Code, spe  |   |
|                             |   | with a bankruptcy case ca<br>18 U.S.C. §§ 152, 1341, 3<br>Signature of Debtor  | an result in fines up to \$25<br>1519, and 3571.  | 0,000, or imprisonment for up  | ure of Debtor 2   |

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| Fill in this in           | Fill in this information to identify your case: |                                   |                     |  |  |  |
|---------------------------|---|-----------------------------------|---------------------|--|--|--|
| Debtor 1                  | Dorothy   | Ann                               | Syers               |  |  |  |
|                           | First Name                                      | Middle Name                       | Last Name           |  |  |  |
| Debtor 2                  |   |                                   |                     |  |  |  |
| (Spouse, if filing)       | First Name                                      | Middle Name                       | Last Name           |  |  |  |
|                           |   | the : <u>NORTHERN</u> District of | ILLINOIS<br>(State) |  |  |  |
| Case Number<br>(if known) |   |                                   |                     |  |  |  |
|                           |   |                                   |                     |  |  |  |

#### Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT an attorney to help y    | /ou fill out bankruptcy forms?  |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
| Under penalty of perjury, I declare that I have read the summary and so | chedules filed with this declaration and that they are true and                               |
| * Dorsch Lyers *  | gnature of Debtor 2   |
| Date : 17/5 /2017 Date MM / DD / YYYY                                   | MM / DD / YYYY  |

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| Debtor 1 | Dorothy    | Ann         | Syers     | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

| Part 12: Sign Be  | alow  |   |  |  |  |
|---|---|---|--|--|--|
| answers are true<br>in connection wi  | e and correct. I understand that making a false statemen lith a bankruptcy case can result in fines up to \$250,000, 1, 1341, 1519, and 3571. | ttachments, and I declare under penalty of perjury that the t, concealing property, or obtaining money or property by fraud or Imprisonment for up to 20 years, or both.  Signature of Debtor 2  Date |  |  |  |
|   |   |   |  |  |  |
| Did you attach a  | dditional pages to Your Statement of Financial Affairs f  | or Individuals Filing for Bankruptcy (Official Form 107)?   |  |  |  |
| No  |   |   |  |  |  |
| Yes   |   |   |  |  |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? |   |   |  |  |  |
| No  |   |   |  |  |  |
| Yes. Name o   | of person   | . Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).  |  |  |  |

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#### DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signers and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filling spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
   b. Failure to keep books and records documenting your financial affairs.
   c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
   d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others
   e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
   f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ. CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!

| Dated: | 121 5 /2017 | HECK, & MAI | MAKE SURE OUR PETITION IS ACCURATE!!!!  |       | <br>X Date & Sign |       |  |
|--------|-------------|-------------|---|-------|-------------------|-------|--|
|        |             |             | , · · · · · · · · · · · · · · · · · · · | Dorot | hy Ann            | Svers |  |

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

in re

**Dorothy Ann Syers / Debtor** 

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

**Dorothy Ann Syers** 

X Date & Sign

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Dorothy Am Syer

Date: 12/5 /2017

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Form B 201A, Notice to Consumer Debtor(s)

In re Dorothy Ann Syers / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 12/5 /2017

Dorothy Ann Syers

X Date & Sign

Dated: 15 /2017

Attorney: Wylie W Mok